



Consolidated Edison Company of New York, Inc.
4 Irving Place, New York, N.Y. 10003

January 17, 1986

CERTIFIED MAIL

Mr. Ralph Manna
Regional Permit Administrator
New York State Department of
Environmental Conservation
Region 3
21 South Putt Corners
New Paltz, New York 12561

Re: SPDES Permit Renewal Application
Indian Point Generating Station
SPDES Permit No. NY 0004472

Dear Mr. Manna:

Enclosed is an original and three copies of a SPDES permit renewal application for the Indian Point Generating Station. This application is submitted jointly by Consolidated Edison Company of New York, Inc. (Con Edison), the owner and operator of Units 1 and 2, and the New York Power Authority (Power Authority), the owner and operator of Unit 3. As confirmed in a December 5, 1985 letter from Dr. John W. Blake of the Power Authority to you, DEC extended the application filing deadline until January 17, 1986.

The application consists of

- o an Application Form 1 for Con Edison, an Application Form 1 for the Power Authority and attached Figures 1-9, which are common to both;
- o a combined Application Form 2C for Con Edison and the Power Authority, including Exhibit Nos. 1-3;
- o a combined DEC Supplement to Application Form 2C for Con Edison and the Power Authority; and
- o separate Industrial Chemical Survey Forms for Con Edison and the Power Authority.

Also enclosed is a check in the amount of \$300.00 to cover the permit application fee.

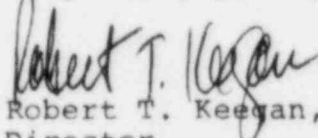
8601230403 860117
PDR ADOCK 05000003
P PDR

50-003
50-247
50-286

IE25
1/1

If you have any questions, please contact me (212-460-4833)
or Dr. John W. Blake, Director, Environmental Division, New York
Power Authority (914-681-6385).

Very truly yours,



Robert T. Keegan, Ph.D.
Director
Water and Waste Management
Environmental Affairs

/gps

cc: John W. Blake, Ph.D.
Director
Environmental Division
New York Power Authority
123 Main Street
White Plains, New York 10601

Mr. Steven A. Varga, Project Director
PWR Project Directorate No.3
Division of PWR Licensing-A
Nuclear Reactor Regulation
U.S. Nuclear Regulatory Commission
Washington D.C. 20555

FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION <i>Consolidated Permits Program</i> (Read the "General Instructions" before starting.)		I. EPA I.D. NUMBER	
<div style="text-align: center; font-size: 2em; font-weight: bold;">EPA</div> <div style="text-align: center; font-weight: bold; margin-top: 20px;">PLEASE PLACE LABEL IN THIS SPACE</div>		GENERAL INSTRUCTIONS		F N Y 0 0 0 4 4 7 2	
		If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.		D	
II. POLLUTANT CHARACTERISTICS					
INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.					
SPECIFIC QUESTIONS		MARK 'X'		SPECIFIC QUESTIONS	
		YES NO FORM ATTACHED			
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		16	17	18	B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)
		X			
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		19	20	21	D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)
		X		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		22	23	24	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)
		X			
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		25	26	27	H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)
		X			
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		28	29	30	J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)
		X			
III. NAME OF FACILITY					
1 SKIP INDIAN POINT UNIT NOS 1 AND 2					
IV. FACILITY CONTACT					
A. NAME & TITLE (last, first, & title)			B. PHONE (area code & no.)		
2 KEEGAN, ROBERT Ph.D DIRECTOR			212 460 4833		
V. FACILITY MAILING ADDRESS					
A. STREET OR P.O. BOX					
3 CON EDISON 4 IRVING PL RM. 300					
B. CITY OR TOWN				C. STATE	D. ZIP CODE
4 NEW YORK				NY	10003
VI. FACILITY LOCATION					
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER					
5B ROADWAY AND BLEAKLEY AVE.					
B. COUNTY NAME					
WESTCHESTER					
C. CITY OR TOWN					
6 BUCHANAN					
D. STATE		E. ZIP CODE		F. COUNTY CODE (if known)	
NY		10511			

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
7	4	9	1	7			
(specify)				(specify)			
Electric Power Generation							
C. THIRD				D. FOURTH			
7				7			
(specify)				(specify)			

VIII. OPERATOR INFORMATION

A. NAME															B. Is the name listed in Item VIII-A also the owner?	
8 CONSOLIDATED EDISON COMPANY OF NEW YORK, INC															<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)															D. PHONE (area code & no.)	
F = FEDERAL M = PUBLIC (other than federal or state) P (specify) S = STATE O = OTHER (specify)															212 460 4833	
E. STREET OR P.O. BOX																
4 IRVING PLACE ROOM 300																
F. CITY OR TOWN										G. STATE		H. ZIP CODE		IX. INDIAN LAND		
B NEW YORK										NY		10003		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
9 N NY 0004472										9 P									
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
9 U										9 NY 014771 (specify) SPDES PERMIT INDIAN POINT NO. 2 SEPTIC SYSTEM									
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
9 R										9 (specify) SEE ATTACHMENT 1									

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

SEE FIGURES 1 TO 9.

XII. NATURE OF BUSINESS (provide a brief description)

This facility generates electricity by means of a steam driven turbine generator with the steam produced by a Pressurized Water Reactor System. The steam is condensed in a surface condenser using Hudson River water as the condenser coolant and the condensate is recycled for steam production.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the 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.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
John A. Nutant, Vice President Environmental Affairs	See Attachment 2 for revised certification and signature.	

COMMENTS FOR OFFICIAL USE ONLY

--	--

EPA I.D. Number
NY0004472

ATTACHMENT 1

CON EDISON
EPA FORM 1
GENERAL INFORMATION
CONSOLIDATED PERMITS PROGRAM

X. Existing Environmental Permits

E. Other (Specify)
C5522011504

Certificate To Operate An
Air Contamination Source

NYD991304411

EPA Hazardous Waste
Generator ID Number

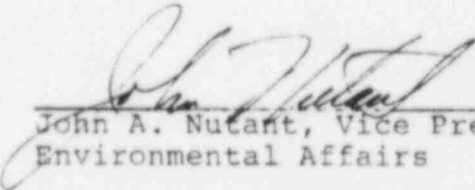
ATTACHMENT 2

CON EDISON
EPA FORM 1
GENERAL INFORMATION
CONSOLIDATED PERMITS PROGRAM

XIII. Certification*

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature


John A. Nutant, Vice President
Environmental Affairs

Date

4/17/86

* The certification statement on EPA Form 1, dated October 1980, was revised in accordance with revised regulations (40 CFR 122.22(d)) published by EPA on September 1, 1983 (Federal Register, Volume 48, Number 171, page 39619).

FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program (Read the "General Instructions" before starting.)		I. EPA I.D. NUMBER FNY 000 4472 D	
II. POLLUTANT CHARACTERISTICS		GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully. If any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.			
INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.					
SPECIFIC QUESTIONS		MARK "X"		SPECIFIC QUESTIONS	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		YES NO FORM ATTACHED		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		YES NO FORM ATTACHED		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		YES NO FORM ATTACHED		F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		YES NO FORM ATTACHED		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		YES NO FORM ATTACHED		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	
III. NAME OF FACILITY					
1 SKIP Indian Point Unit 3 Nuclear Power Plant					
IV. FACILITY CONTACT					
A. NAME & TITLE (last, first, & title)			B. PHONE (area code & no.)		
2 Blake John W. Dir. Environ. Div.			914 681 6385		
V. FACILITY MAILING ADDRESS					
A. STREET OR P.O. BOX					
3 23 Main Street					
B. CITY OR TOWN			C. STATE D. ZIP CODE		
4 White Plains			NY 10601		
VI. FACILITY LOCATION					
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER					
5 Blakely Avenue					
B. COUNTY NAME					
Westchester					
C. CITY OR TOWN			D. STATE E. ZIP CODE F. COUNTY CODE (if known)		
6 Buchanan			NY 10511		

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST		B. SECOND	
7	4 9 1 1 (specify) Electric Power Generation	7	(specify)
C. THIRD		D. FOURTH	
7	(specify)	7	(specify)

VIII. OPERATOR INFORMATION

A. NAME		B. Is the name listed in Item VIII-A also the owner?	
8 Power Authority of the State of New York		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)		D. PHONE (area code & no.)	
F = FEDERAL S = STATE P = PRIVATE M = PUBLIC (other than federal or state) O = OTHER (specify)		9 1 4 6 8 1 6 3 8 5	
E. STREET OR P.O. BOX			
1 2 3 Main Street			
F. CITY OR TOWN		G. STATE	H. ZIP CODE
8 White Plains		NY	1 0 6 0 1
		IX. INDIAN LAND	
		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)		D. PSD (Air Emissions from Proposed Sources)	
9 N NYC 00 44 72		9 P	
B. UIC (Underground Injection of Fluids)		E. OTHER (specify)	
9 U		NY D 0 8 5 5 0 3 7 4 6 (specify) Hazardous Waste Generator ID Number (USEPA)	
C. RCRA (Hazardous Wastes)		F. OTHER (specify)	
9 R		(specify)	

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

This facility generates electricity by means of a steam driven turbine. Steam is produced by a means of a pressurized water reactor system.

The application submitted herewith is for renewal of the existing SPDES permit (NY004472) which covers wastewater discharges from Indian Point Unit 3 (New York Power Authority) and Units 1 and 2 (Consolidated Edison).

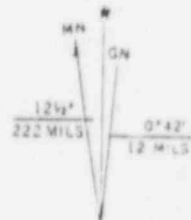
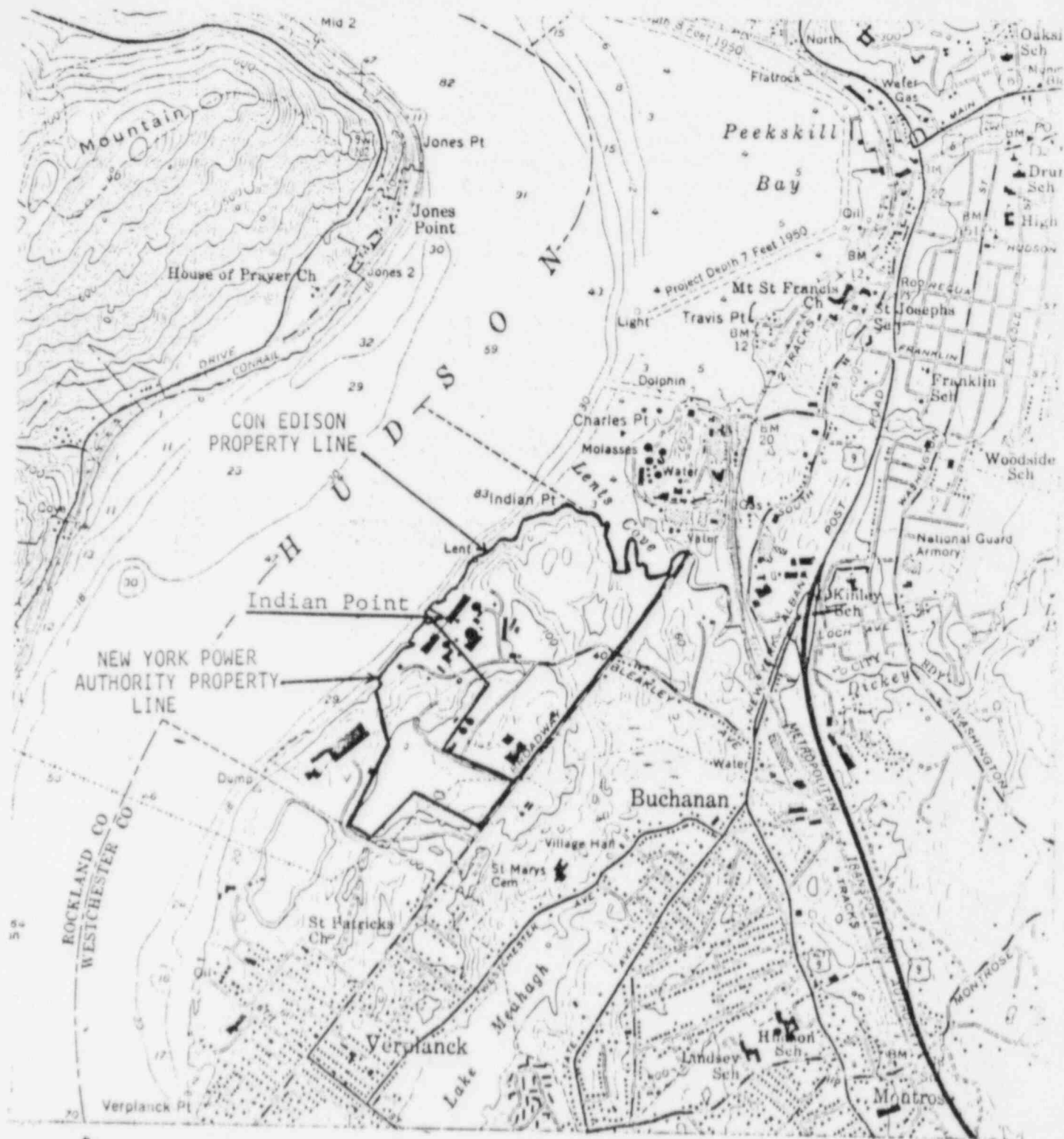
XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the 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.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
John W. Blake, Ph.D. Director, Environmental Division	<i>John W. Blake</i>	16 Jan 86

COMMENTS FOR OFFICIAL USE ONLY

C.	
----	--



UTM GRID AND 1981 MAGNETIC NORTH
DECLINATION AT CENTER OF SHEET

Scale 1:24,000

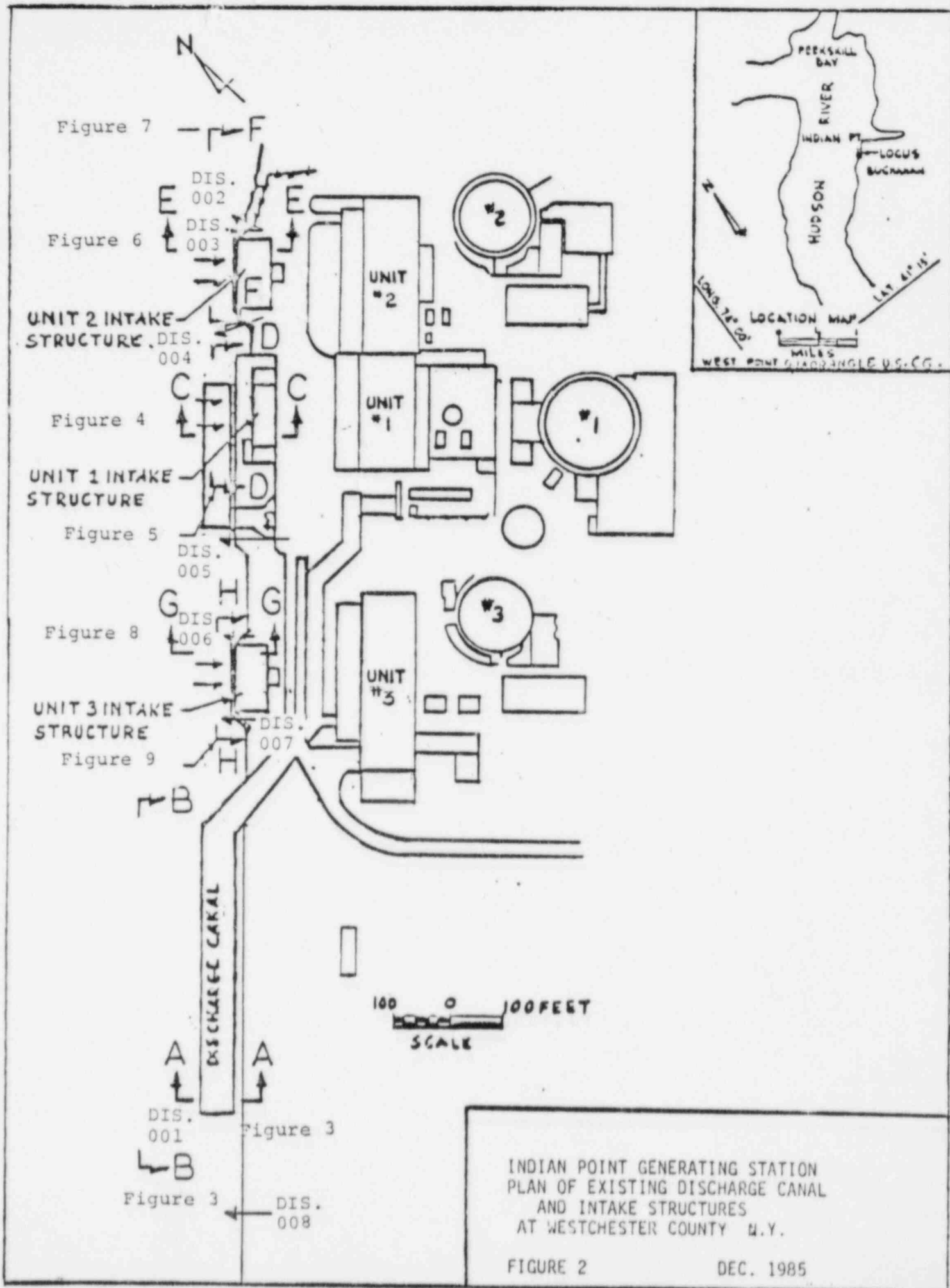
1000 0 Feet

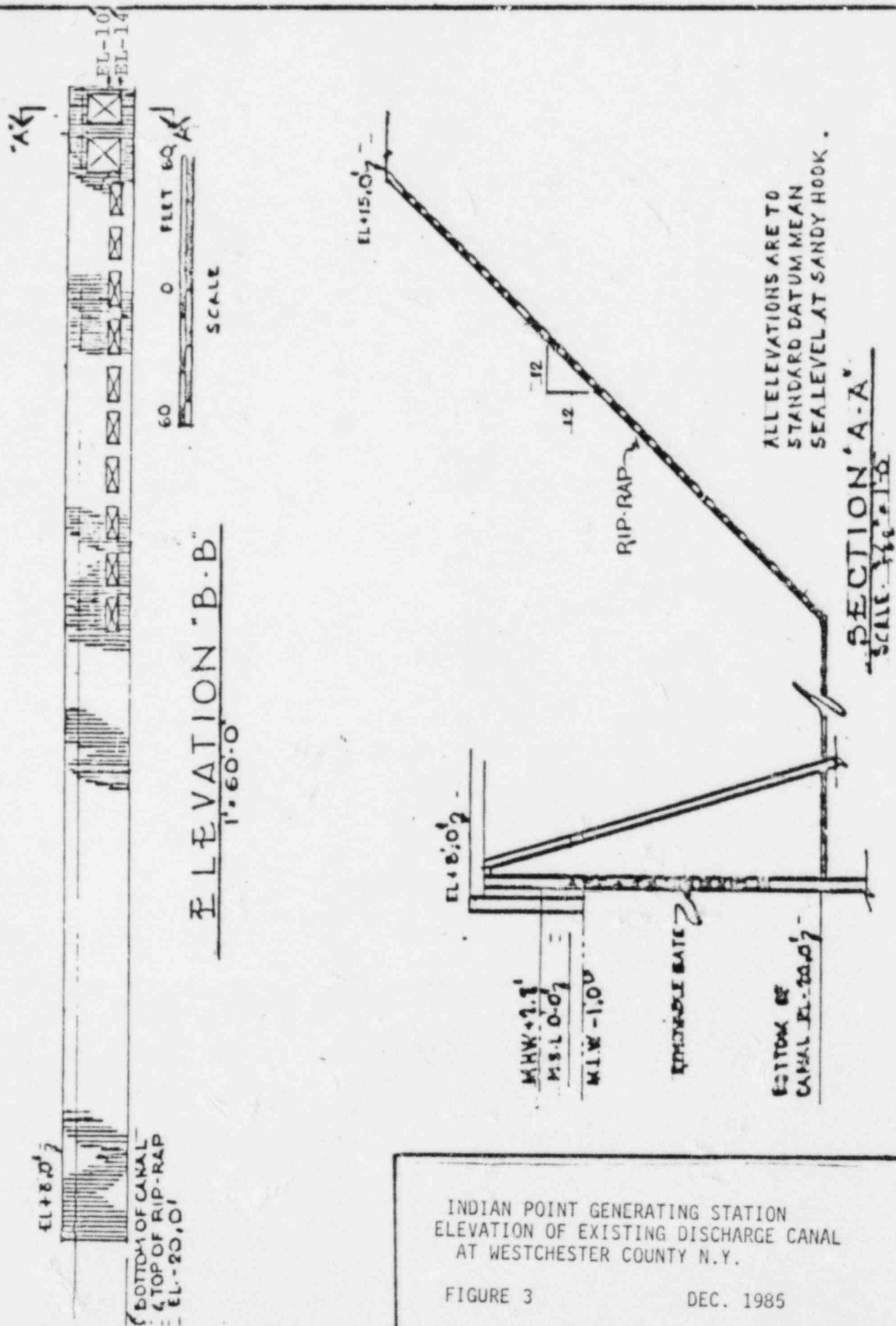
CONSOLIDATED EDISON COMPANY
OF NEW YORK, INC. AND
NEW YORK POWER AUTHORITY
INDIAN POINT GENERATING STATION
UNIT NOS. 1,2,&3
TOPOGRAPHICAL MAP

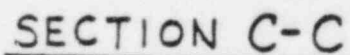
USGS Map Peekskill, N.Y.

FIGURE 1

DEC, 1985







ALL ELEVATIONS ARE TO
STANDARD DATUM MEAN
SEA LEVEL AT SANDY HOOK.

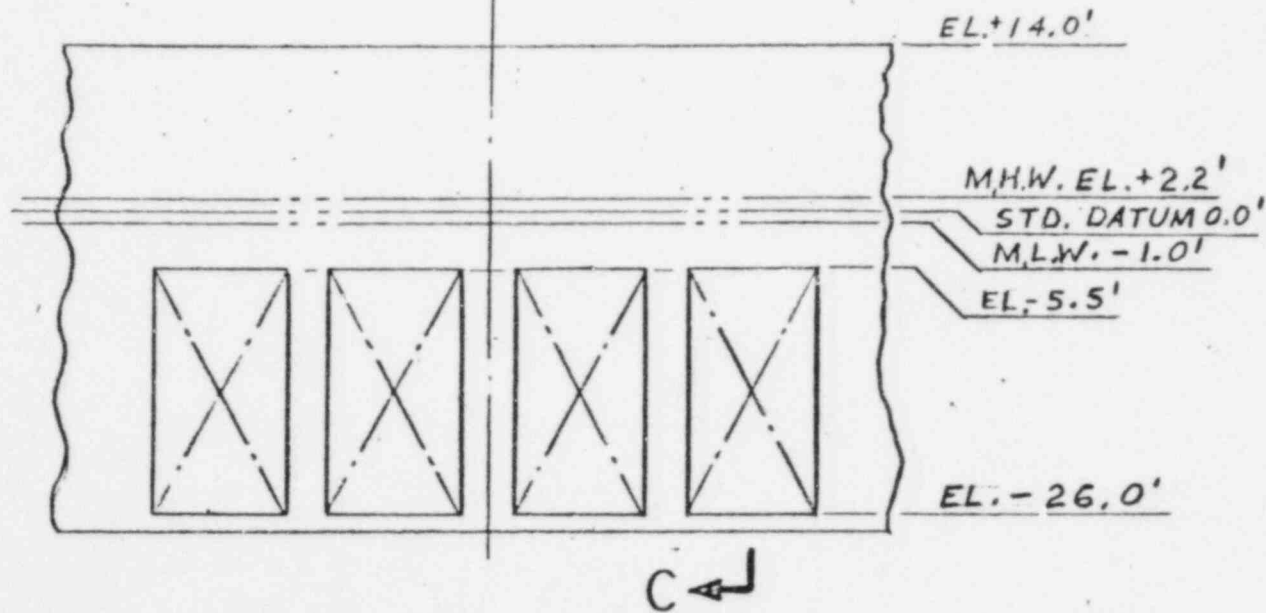
INDIAN POINT GENERATING STATION
UNIT NO.1
SECTION OF EXISTING INTAKE TUNNEL
AT WESTCHESTER COUNTY, N.Y.

FIGURE 4

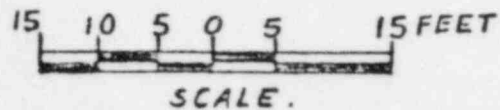
DEC. 1935

SEE
FIGURE 4

C ←



ELEVATION D-D



ALL ELEVATIONS ARE TO
STANDARD DATUM MEAN
SEA LEVEL AT SANDY HOOK.

INDIAN POINT GENERATING STATION
UNIT NO. 1
ELEVATION OF EXISTING INTAKE STRUCTURE
AT WESTCHESTER COUNTY, N.Y.

FIGURE 5

DEC. 1985

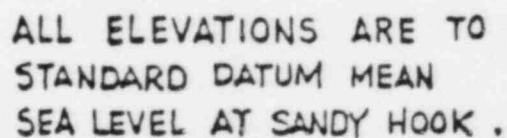
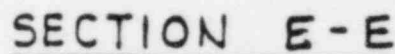
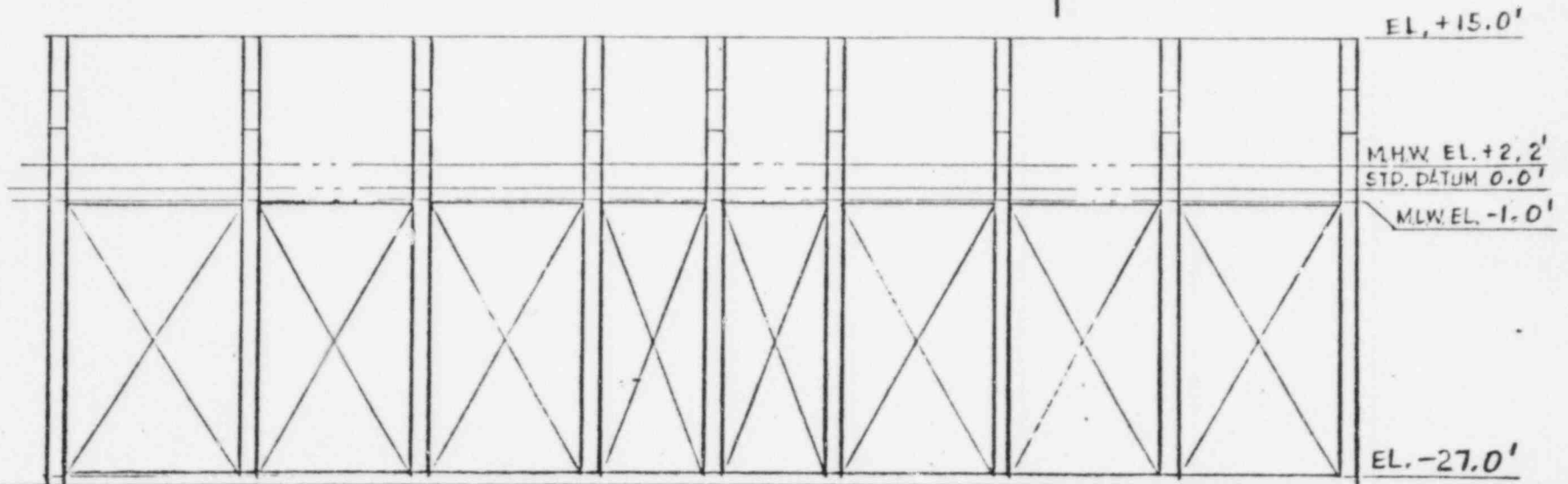


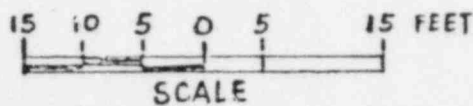
FIGURE 6

DEC. 1985

SEE
FIGURE 6



ELEVATION F-F

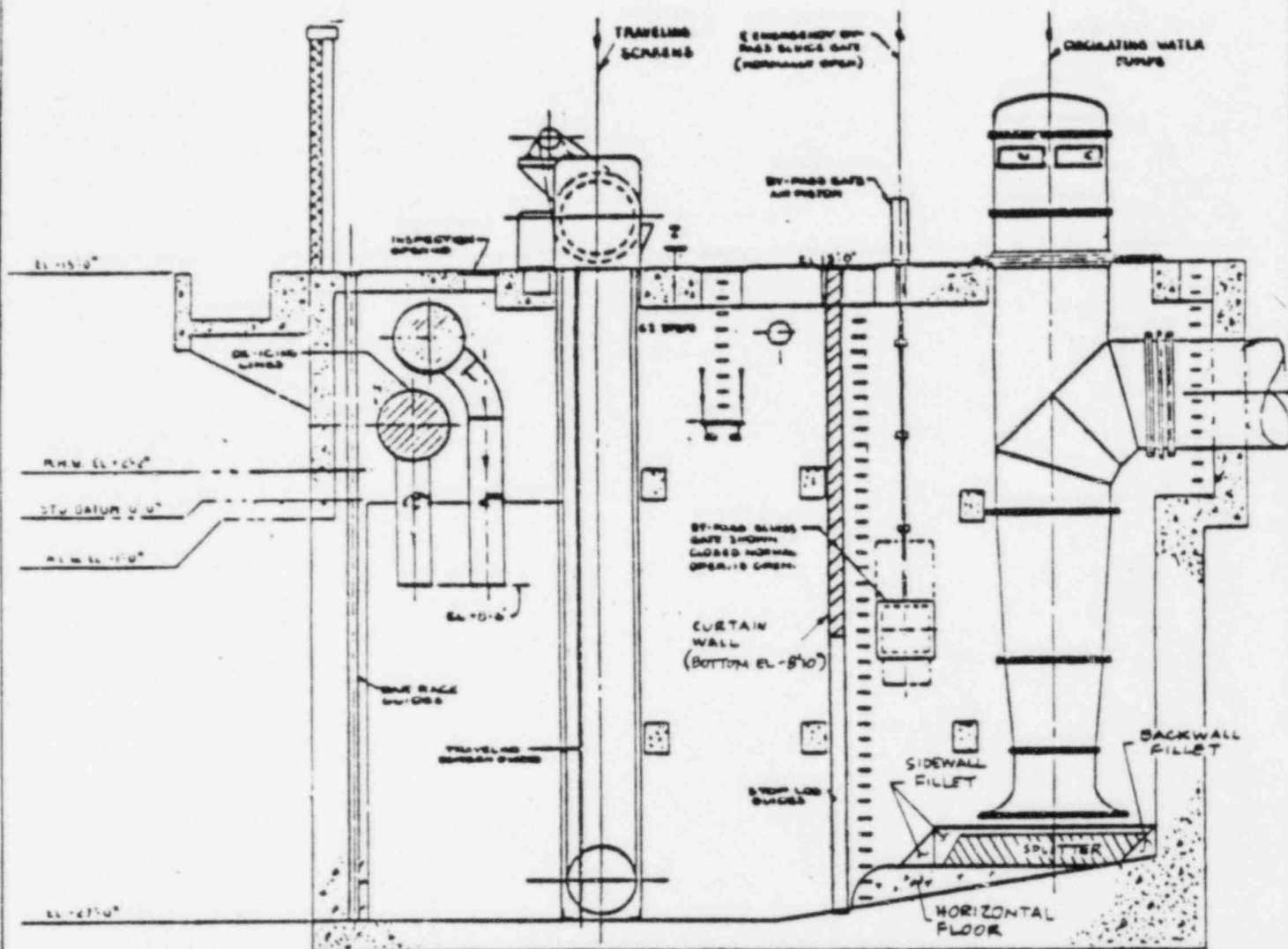


ALL ELEVATIONS ARE TO
STANDARD DATUM MEAN
SEA LEVEL AT SANDY HOOK

INDIAN POINT GENERATING STATION
UNIT NO.2
ELEVATION OF EXISTING INTAKE STRUCTURE
AT WESTCHESTER COUNTY, N.Y.

FIGURE 7

DEC. 1985



SECTION G-G

10 5 0 10 FEET
SCALE

ALL ELEVATIONS ARE TO
STANDARD DATUM MEAN
SEA LEVEL AT SANDY HOOK

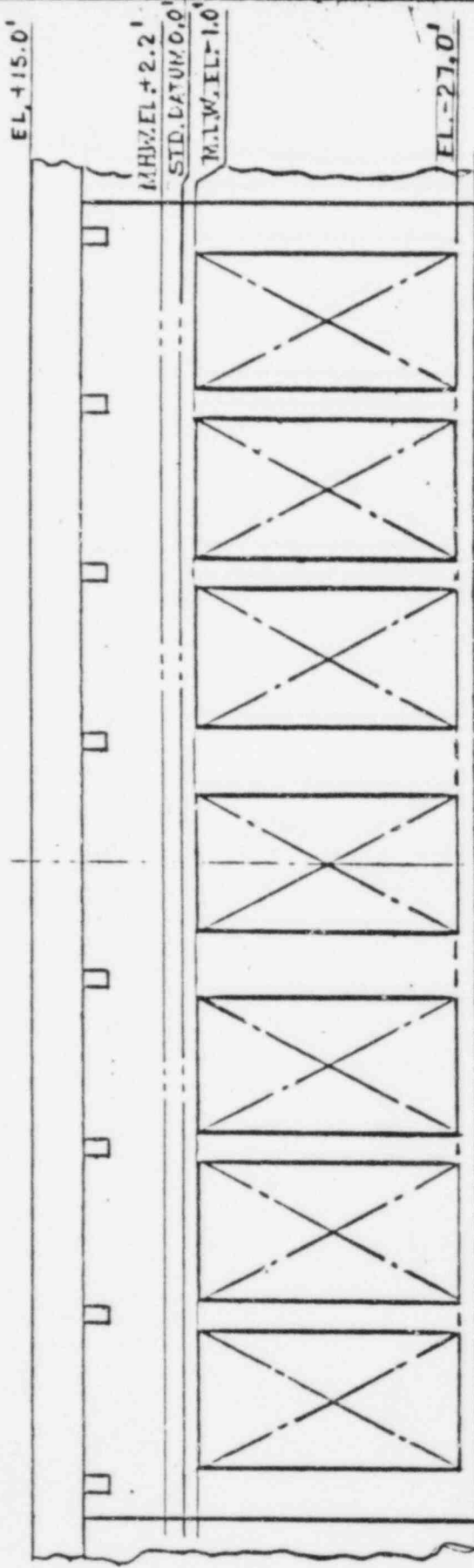
INDIAN POINT GENERATING STATION
UNIT NO. 3
SECTION OF EXISTING INTAKE TUNNEL
AT WESTCHESTER COUNTY, N.Y.

FIGURE 8

DEC. 1985

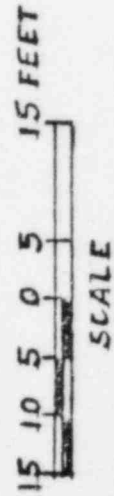
SEE
FIGURE 8

G



G

ELEVATION H-H



ALL ELEVATIONS ARE TO
STANDARD DATUM MEAN
SEA LEVEL AT SANDY HOOK.

INDIAN POINT GENERATING STATION
UNIT NO. 3
ELEVATION OF EXISTING INTAKE STRUCTURE
AT WESTCHESTER COUNTY, N.Y.

FIGURE 9

DEC. 1985

FORM
2C
NPDES
 U.S. ENVIRONMENTAL PROTECTION AGENCY
 APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
 EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
 Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER (list)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (name)
	1. DEG.	2. MIN.	3. SEC.	1. DEG.	2. MIN.	3. SEC.	
001	41	16	7	73	57	19	Hudson River
002	41	16	17	73	56	53	Hudson River
003	41	16	17	73	56	53	Hudson River
004	41	16	16	73	56	57	Hudson River
005	41	16	12	73	57	17	Hudson River
006	41	16	11	73	57	18	Hudson River

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO. (list)	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT		d. LIST CODES FROM TABLE 2C-1
	a. OPERATION (list)	b. AVERAGE FLOW (include units)	a. DESCRIPTION		
001	Cooling Water and Low	See Exhibit #2	Discharge to Surface Water	4A	
	Volume Wastes	For average			
		and maximum			
		flow informa-			
		tion for all			
		discharges and			
		waste sources.			
	The following internal waste				
	streams contribute to 001:				
	001A-Sewage Treatment		Comminutor	1L	
	Plant Effluent (NYPA)		Equalization (10,000 gal tank)	XX	
			Activated Sludge (Extended Aeration)	3A	1U
			Aeration Tank-20,948 gal.		
			Clarifier - 4,045 gal.		
			Chlorination	2F	
			Chlorine Contact Tank -		
			417 gal.		
			Offsite Sludge Disposal	XX	
	001B-Steam Generator Blowdown		Flash Tank-Cooling and	XX	
	(Con Edison & NYPA)		Partial Evaporation		
	001C-Con Edison Primary Waste		Filtration (Pre)	XX	
	Disposal System Effluent		Ion Exchange or Evaporation	2J or	1F
			Filtration (Post)	XX	
			(continued)		

OFFICIAL USE ONLY (effluent guidelines sub-categories)

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☐ YES (complete the following table)☐ NO (go to Section III)

I. OUTFALL NUMBER (list)	2. OPERATION(S) CONTRIBUTING FLOW (list)	3. FREQUENCY		4. FLOW				C. DURATION (in days)
		a. DAYS PER WEEK (specify average)	b. MONTHS PER YEAR (specify average)	a. FLOW RATE (in mgd)		b. TOTAL VOLUME (specify with units)		
				1. LONG TERM AVERAGE	2. MAXIMUM DAILY	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☐ YES (complete Item III-B)☐ NO (to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?

☐ YES (complete Item III-C)☐ NO (go to Section IV)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION

2. AFFECTED

OUTFALLS
(list outfall numbers)

a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	2. AFFECTED OUTFALLS (list outfall numbers)

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ YES (complete the following table)☐ NO (go to Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
	a. NO.	b. SOURCE OF DISCHARGE	a. RE- QUIRED	b. PRO- JECTED	

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

Please print or type in the unshaded areas only.

NY0004472



EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. SUFFALL NUMBER (list)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (name)
	1. DEG.	2. MIN.	3. SEC.	1. DEG.	2. MIN.	3. SEC.	
		(Continued)					
007	41	16	10	73	57	19	Hudson River
008	41	16	4	73	57	26	Hudson River

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

8. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUT-FALL NO. (list)	2. CONTRIBUTING FLOW		3. TREATMENT	
	A. OPERATION (list)	B. AVERAGE FLOW (include units)	C. DESCRIPTION	D. LIST CODES FROM TABLE 2C-1
	001D-NYPA Primary Waste		Filtration (Pre)	XX
	Disposal System Effluent		Ion Exchange	2J
			Filtration (Post)	XX
	001E-Make-Up Water Ion		Neutralization	2K
	Exchanger Regeneration		Units 1&2-20,000 gal. tank	
	Wastes (Con Edison & NYPA)		Unit 3 - 24,000 gal. tank	
	001F-Unit 3 Flash Evaporator		None	
	Blowdown (NYPA)			
	001G-Service Boiler Blowdown		None	
	(Con Edison & NYPA)			
	001H-Unit 2 Flash Evaporator		None	
	Blowdown (Con Edison)			
	001I-Condenser and Service		None	
	Cooling Water (Con			
	Edison & NYPA)			
	001J-Secondary Floor & Equip-		None	
	ment Drainage (Con Edison			
	& NYPA)			

Please print or type in the unshaded areas only.


U.S. ENVIRONMENTAL PROTECTION AGENCY
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program
I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER (list)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (name)
	1. DEG.	2. MIN.	3. SEC.	1. DEG.	2. MIN.	3. SEC.	

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NUMBER (list)	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT	
	A. OPERATION (list)	B. AVERAGE FLOW (include units)	C. DESCRIPTION	D. LIST CODES FROM TABLE 2C-1
	(Continued)			
001K	Units 1&2 Make-Up		Sedimentation Basin	1U
	Water Filter Backwash		(85,000 gal)	
	(Con Edison)*			
001L	Unit 3 Condensate		Neutralization (61,650 gal tank)	2K
	Polisher/Make-Up			
	Demineralizer Filter			
	Backwash and Ion Exchan-			
	ger Regeneration			
	Wastes (NYPA)			
001M	Uncontaminated		None	
	Stormwater Runoff			
	(Con Edison & NYPA)			
	*On January 29, 1985, Con Edison submitted an application for modification to permit			
	discharge of this waste stream. A draft modification was issued on August 8, 1985 and a			
	final modification is pending. Pending final modification, DEC, in letters dated			
	June 21, 1985 and August 7, 1985, approved the discharge of filter backwash provided that			
	it is routed to Con Edison's make-up ion exchanger waste neutralization tank and			
	discharged via currently permitted waste stream 001E. After permit modification, filter			
	backwash may be discharged via waste stream 001E and/or waste stream 001K.			

Please print or type in the unshaded areas only.

FORM 20 NPDES		U.S. ENVIRONMENTAL PROTECTION AGENCY
		APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS		
Consolidated Permits Program		

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER (list)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (name)
	1. DEG.	2. MIN.	3. SEC.	1. DEG.	2. MIN.	3. SEC.	

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO. (list)	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT	
	B. OPERATION (list)	D. AVERAGE FLOW (include units)	E. DESCRIPTION	F. LIST CODES FROM TABLE 2C-1
	(Continued)			
	The following discharges consist solely of uncontaminated stormwater runoff:			
002	Yard Storm Drainage - North-East of Unit No. 2 Screenwell Structure		Discharge to Surface Water	4A
003	Yard Storm Drainage - East of Unit No. 2 Screenwell Structure		Discharge to Surface Water	4A
004	Yard Storm Drainage - North an East of Unit No. 1 Screenwell Structure		Discharge to Surface Water	4A
005	Yard Storm Drainage - Condensate Polisher Facility for Unit No. 3		Discharge to Surface Water	4A
006	Yard Storm Drainage - Unit No. 3 Intake Structure		Discharge to Surface Water	4A

☒ **YES** (complete the following table)☐ **NO** (go to Section III)

1. OUTFALL NUMBER <i>(list)</i>	2. OPERATION(S) CONTRIBUTING FLOW <i>(list)</i>	3. FREQUENCY		4. FLOW				C. DUR- ATION <i>(in days)</i>	
		a. DAYS PER WEEK <i>(specify average)</i>	b. MONTHS PER YEAR <i>(specify average)</i>	a. FLOW RATE <i>(in mgd)</i>		D. TOTAL VOLUME <i>(specify with units)</i>			
				1. LONG TERM AVERAGE	2. MAXIMUM DAILY	1. LONG TERM AVERAGE	2. MAXIMUM DAILY		
	There are no seasonal discharges. Intermittent discharges are described in Exhibit #3.								

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☒ YES (complete Item III-B)☐ **NO** (to to Section IV)

5. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?

☐ **YES** (complete Item III-C)

☒ NO (go to Section IV)

C. If you answered "yes" to item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION			2. AFFECTED OUTFALLS (list outfall numbers)
B. QUANTITY PER DAY	D. UNITS OF MEASURE	C. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of waste-water treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ YES (complete the following table)

☒ NO (go to Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COM- PLIANCE DATE	
	B. NO.	D. SOURCE OF DISCHARGE		B. RE- QUIRED	D. PRO- JECTED

8. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS

DA Form 3510-2C (Rev. 2-85)

PAGE 2 OF 1

CONTINUE ON PAGE 4

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding — Complete one set of tables for each outfall — Annotate the outfall number in the space provided.
NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
None			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ YES (list all such pollutants below)

☒ NO (go to Item VI-B)

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ YES (identify the test(s) and describe their purposes below)

☒ NO (go to Section VIII)

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

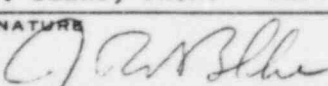
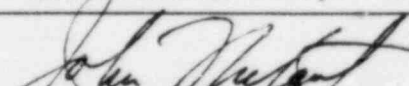
☒ YES (list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)

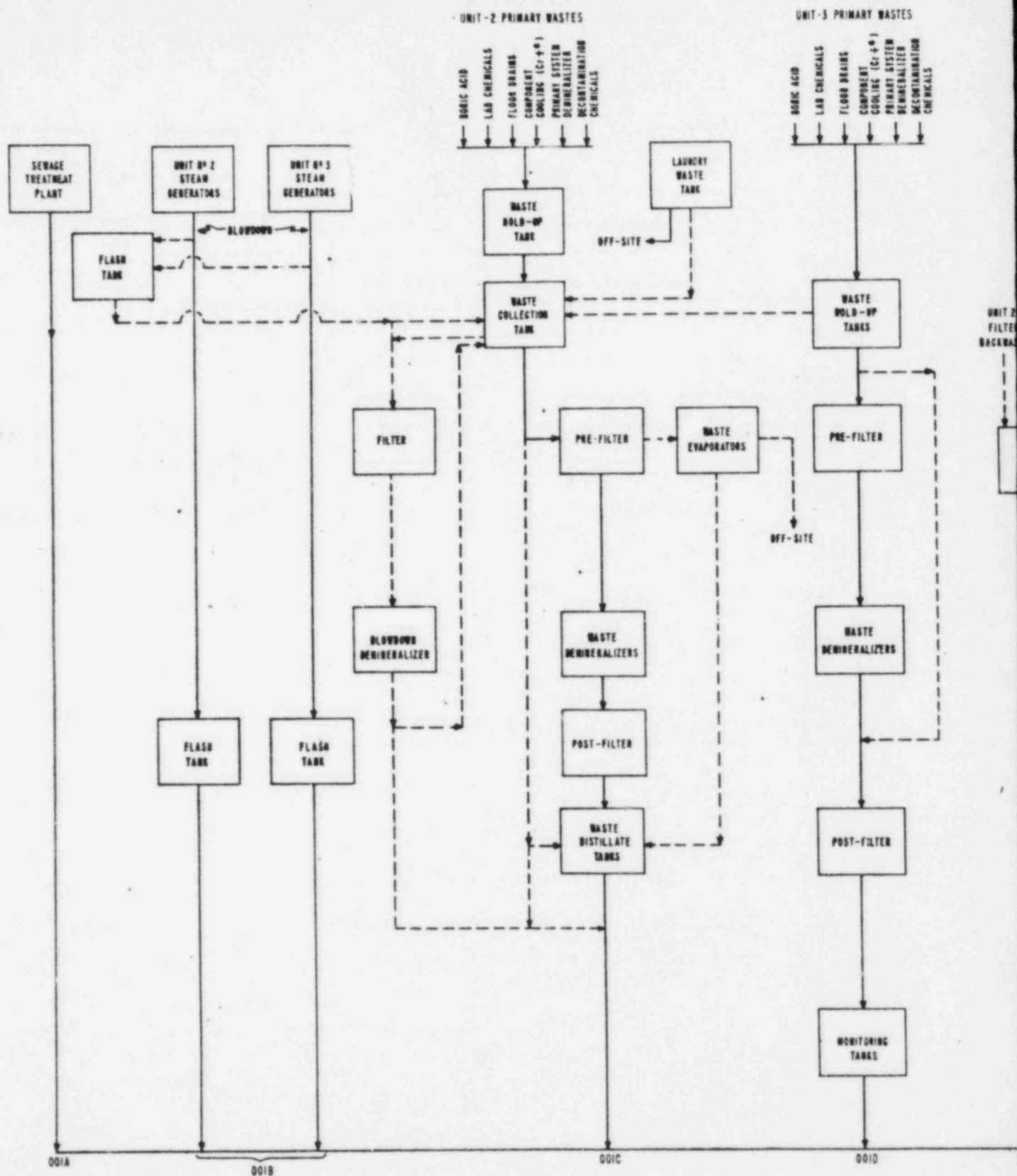
☐ NO (go to Section IX)

A. NAME	B. ADDRESS	C. TELEPHONE (area code & no.)	D. POLLUTANTS ANALYZED (list)
NUS Corporation - Laboratory Services Division	5350 Campbells Run Road Pittsburgh, Pa. 15205	(412) 788-1080	All except pH, temperature, and residual chlorine.

IX. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

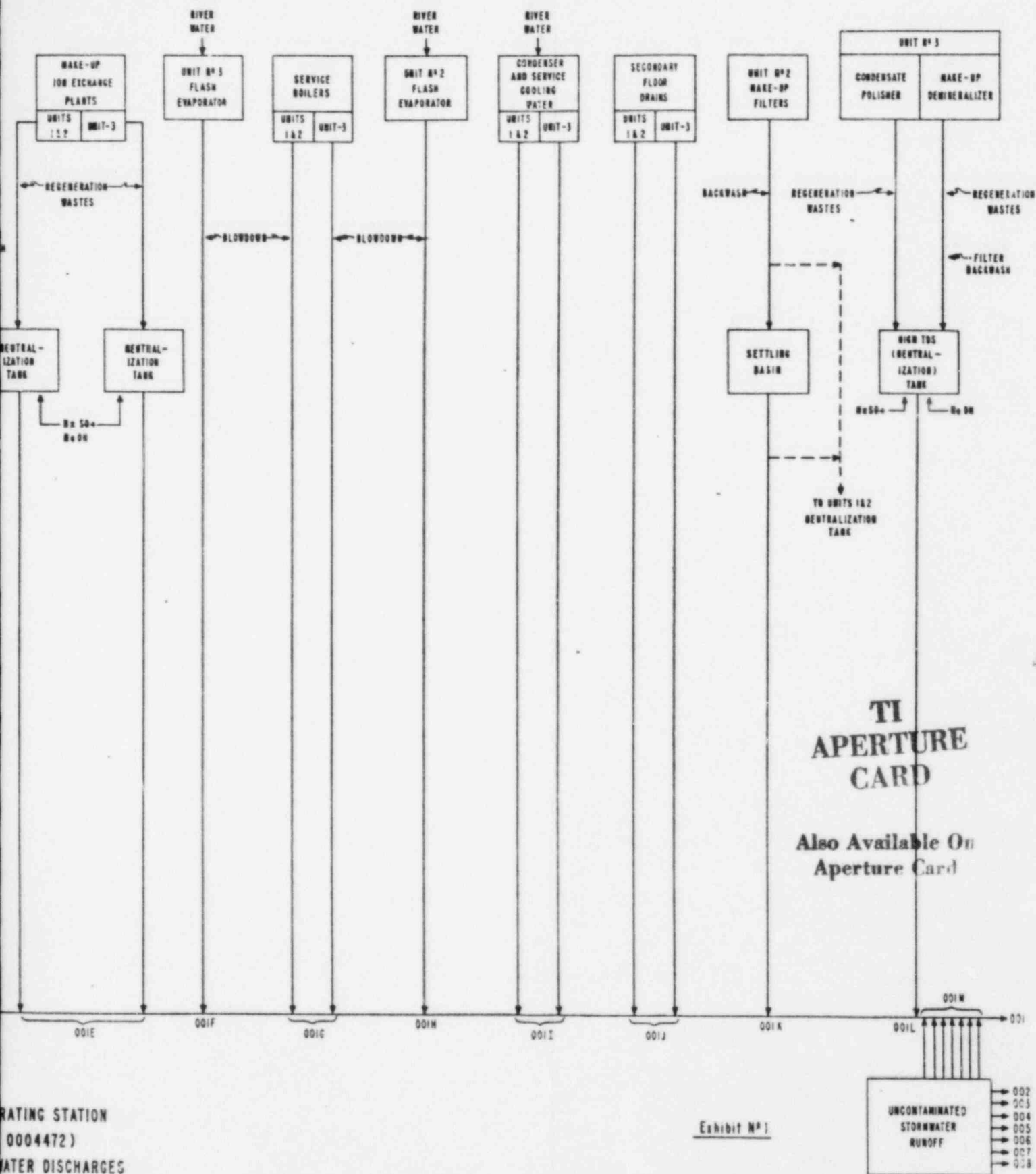
A. NAME & OFFICIAL TITLE (type or print)	B. PHONE NO. (area code & no.)
John A. Nutant - Vice President - Environmental Affairs, Con Edison	(212) 460-4940
John W. Blake, Ph.D. - Director - Environmental Div., NYPA	(914) 681-6385
C. SIGNATURE	D. DATE SIGNED
 	16 Jan 86 1/17/86



NOTES:

1. - UNLESS SPECIFIED OTHERWISE, THE SOURCE OF ALL WASTE STREAMS IS CITY WATER
2. - SOLID LINE - NORMAL FLOW PATH
3. - DASHED LINE - ALTERNATE FLOW PATH
4. - AVG. AND MAX. FLOW VALUES ARE PRESENTED IN EXHIBIT 2

INDIAN POINT GENERATION
(SPDES #A NY)
SCHEMATIC OF WASTE TREATMENT



ATING STATION
0004472)
WATER DISCHARGES

Exhibit #1

8601230403-01

Exhibit #2
Item II.B. to Application Form 2C
Discharge and Waste Stream Flow
Indian Point Generating Station
SPDES No. NY0004472

<u>Discharge/Waste Stream Contribution</u>	<u>Responsible Utility</u>	<u>Average Flow (MGD) ⁽¹⁾</u>	<u>Maximum Flow (MGD) ⁽²⁾</u>
001A - Sewage Treatment Plant Effluent	NYPA	0.03	0.06
001B - Steam Generator Blowdown ⁽³⁾			
Unit Nos. 1 and 2	Con Edison	0.32	0.80
Unit No. 3	NYPA	0.32	0.80
001C - Con Edison Primary Waste Disposal System Effluent ⁽³⁾	Con Edison	0.010	0.050
001D - NYPA Primary Waste Disposal System Effluent	NYPA	0.013	0.031
001E - Make-Up Water Ion Exchanger Regeneration Wastes			
Units Nos. 1 and 2	Con Edison	0.031	0.040
Unit No. 3	NYPA	0.041	0.072
001F - Unit No. 3 Flash Evaporator Blowdown ⁽⁴⁾	NYPA	0.072	0.13
001G - Service Boiler Blowdown			
Units Nos. 1 and 2	Con Edison	0.014	0.014
Unit No. 3	NYPA	0.014	0.014
001H - Unit No. 2 Flash Evaporator Blowdown ⁽⁴⁾	Con Edison	0.072	0.13
001I - Condenser and Service Cooling Water ⁽⁵⁾			
Units Nos. 1 and 2	Con Edison	1,276	1,276
Unit No. 3	NYPA	1,253	1,253
001J - Secondary Floor and Equipment Drainage			
Units Nos. 1 and 2	Con Edison	0	0.001
Unit No. 3	NYPA	0	0.001
001K - Units Nos. 1 and 2 Make-Up Water Filter Backwash	Con Edison	0.016	0.028
001L - Unit No. 3 Condensate Polisher/Make-Up Water Demineralizer Filter Backwash and Ion Exchanger Regeneration Wastes ⁽⁷⁾	NYPA	0.030	0.034

Exhibit #2
Item II.B. to Application Form 2C
Discharge and Waste Stream Flow
Indian Point Generating Station
SPDES No. NY0004472

<u>Discharge/Waste Stream Contribution</u>	<u>Responsible Utility</u>	<u>Average Flow (MGD) (1)</u>	<u>Maximum Flow (MGD) (2)</u>
001M - Uncontaminated Stormwater Runoff (8)			
Unit Nos. 1 and 2 (12 acres)	Con Edison	0.037	1.390
Unit No. 3 (100 acres)	NYP&A	0.110	4.770
001 - Total		2,530	2,537
Uncontaminated Stormwater Runoff Discharges (8)			
002 - (0.4 acres)	Con Edison	0.001	0.049
003 - (0.6 acres)	Con Edison	0.002	0.084
004 - (1.9 acres)	Con Edison	0.006	0.263
005 - (0.2 acres)	NYP&A	0.001	0.025
006 - (0.6 acres)	NYP&A	0.001	0.037
007 - (0.6 acres)	NYP&A	0.001	0.037
008 - (0.2 acres)	NYP&A	0.001	0.027

Footnotes to Exhibit #2

1. Except where specified otherwise, average flows represent the highest expected monthly average.
2. Except where specified otherwise, maximum flows represent the highest expected daily value.
3. There are a total of eight steam generators, four for Unit No. 2 and four for Unit No. 3. The flow values presented for waste streams 001B and 001C reflect normal operations, in which blowdown from all steam generators is discharged via 001B and not treated in Con Edison's primary waste disposal system (001C). If necessary, steam generator blowdown may be treated in either Con Edison's blowdown demineralizer train or Con Edison's waste demineralizer train and discharged via waste stream 001C. It is expected that blowdown from no more than two of the eight steam generators will require such treatment at any time. In such case, the maximum flow of waste stream 001C would increase by 0.40 MGD.
4. Flash evaporators at Unit Nos. 2 and 3 are currently not in service. The estimated average and maximum flows specified for flash evaporator blowdown (001F and 001H) reflect normal, full service operation.
5. Average and maximum flows for waste stream 001I assume all Unit Nos. 2 and 3 condenser cooling water and service

Footnotes to Exhibit #2

cooling water pumps are operating at full flow and a typical Unit No. 1 service water flow of 16,000 gpm (23 MGD).

6. Waste stream 001K is proposed. In accordance with DEC approval, filter backwash is currently routed to Con Edison's make-up water ion exchanger regeneration waste neutralization tank and discharged via waste stream 001E. After formal permit modification, filter backwash may be discharged via waste stream 001E and/or waste stream 001K. Flow values presented for waste streams 001E and 001K assume that filter backwash will only be discharged via 001K. Flow values presented for waste stream 001K are based on design conditions. Actual flow values will vary depending on municipal water supply quality and operating conditions.
7. Flow values are based on projections.
8. Average stormwater flows are based on an average annual rainfall of 42 inches (0.115 inches/day). Maximum stormwater flows are based on a once in 10 years, 24 hour rainfall of 5 inches. Both the average and maximum flow values are based on specified estimated drainage areas.

EXHIBIT #3
 ITEM 11.C. TO APPLICATION FORM 2C
INTERMITTENT DISCHARGES
INDIAN POINT GENERATING STATION
SPDES No. NY0004472

<u>Waste Stream</u>	<u>Discharge Frequency</u>		<u>Flow Rate (gpm)</u>	<u>Duration (1) (min.)</u>	<u>Max. Volume per Discharge (gal)</u>
	<u>Avg.</u>	<u>Max.</u>			
001C - Con Edison Primary Waste Dis- posal System Effluent	0.4/day	2/day	50-250	500-100	25,000
001D - NYPA Primary Waste Dis- posal System Effluent	0.7/day	3/day	50-250	206-41	10,300
001E - Make-Up Water Ion Exchanger Regeneration Wastes					
Con Edison	0.5/day	2/day	150	133	20,000
NYPA	1.9/day	3/day	150	160	24,000
001K - Unit Nos. 1&2 Make-Up Water Filter Backwash (Con Edison) (2)					
Pre-Filter Backwash	2/day	3/day	150	30	4,500
Carbon Filter Backwash	1.5/day	3/day	358	13	4,650
001L - Unit No. 3 Condensate Polisher/Make-Up Demineralizer Filter Backwash and Ion Exchanger Regeneration Wastes (NYPA) (3)	1/day	1/day	500	55-67	27,500-33,500

Footnotes

(1) Based on maximum volume per discharge.

(2) Proposed discharge. In accordance with DEC approval, filter backwash is currently routed to Con Edison make-up water ion exchanger regeneration waste neutralization tank and discharged via waste stream 001E. After formal permit modification, filter backwash will be discharged via 001E and/or 001K. Specified values are based on design conditions. Actual discharge values will vary depending on municipal water supply quality and operating conditions. The flow rate specified for the carbon filter backwash is an average value over the duration of the discharge based on a design backwash flow rate of 375 gpm for 10 minutes and design rinse cycle flow rate of 300 gpm for 3 minutes.

(3) Data are based on projections.

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. SEE INSTRUCTIONS.

EPA I.D. NUMBER (copy from Item 1 of Form 1)



NY 0004472

Form Approved
OMB No. 2000-0059
Approval expires 12-31-85

V. INTAKE AND EFFLUENT CHARACTERISTICS (continued from page 3 of Form 2-C)

OUTFALL NO.
001

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT						3. UNITS (specify if blank)		4. INTAKE (optional)			
	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVG. VALUE (if available)				a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES	
	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)				
	CONCENTRATION	MASS	CONCENTRATION	MASS	CONCENTRATION	MASS	CONCENTRATION	MASS	CONCENTRATION	MASS		
a. Biochemical Oxygen Demand (BOD)	1	21,113					1	PPM	LBS/DAY	3	63,339	1
b. Chemical Oxygen Demand (COD)	14	295,582					1	PPM	LBS/DAY	16	313,772	1
c. Total Organic Carbon (TOC)	5.0	105,565					1	PPM	LBS/DAY	8.9	187,906	1
d. Total Suspended Solids (TSS)	19	401,147					1	PPM	LBS/DAY	31	654,503	1
e. Ammonia (as N)	0.2	4,223					1	PPM	LBS/DAY	< 0.1	< 2,111	1
f. Flow (1)	VALUE 2,530		VALUE 2,530		VALUE 1,949		CONT	MGD	—	VALUE 2,530		CONT
g. Temperature (winter) (2)	VALUE 30 (86.0)		VALUE 23.3 (73.9)		VALUE 15.6 (60.1)		CONT	°C (°F)		VALUE 2.2 (36.0)		CONT
h. Temperature (summer) (3)	VALUE 40 (104.0)		VALUE 35.8 (96.4)		VALUE 33.9 (93.0)		CONT	°C (°F)		VALUE 25.4 (77.7)		CONT
i. pH (4)	MINIMUM 7.1	MAXIMUM 8.4	MINIMUM 7.5	MAXIMUM 7.9			140	STANDARD UNITS				

PART B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUT- ANT AND CAS NO. (if available)	2. MARK "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. BE- LIEVED PRE- SENT	b. BE- LIEVED AB- SENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVG. VALUE (if available)		d. NO. OF ANAL- YSES	e. LONG- TER- M RAT- ION	f. MASS	g. LONG TERM AVERAGE VALUE		h. NO. OF ANAL- YSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
a. Bromide (24959-67-9)	X		<2	< 42,226					1	PPM	LBS/DAY	< 2	<42,226	1
b. Chlorine, (5) Total Residual	X		0.45	9,501	< 0.1	< 2,111	<0.1	<1,626	—	PPM	LBS/DAY	< 0.1	<2,111	—
c. Color	X		7	—					1	Pt-Co	—	11	—	1
d. Fecal Coliform	X		>2,400	—					1	MPN / 100M1	—	> 2,400	—	1
e. Fluoride (16984-48-8)	X		< 0.5	<10,557					1	PPM	LBS/DAY	< 0.5	<10,557	1
f. Nitrate-- Nitrite (as N)	X		0.8 - <0.01	16,890- <211					1	PPM	LBS/DAY	0.9- < 0.01	19,002 - < 211	1

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X'		3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	B. BELIEVED PRESENT	D. BELIEVED ABSENT	B. MAXIMUM DAILY VALUE		D. MAXIMUM 30 DAY VALUE (if available)		C. LONG TERM AVG. VALUE (if available)		D. NO. OF ANALYSES	B. CONCENTRATION	D. MASS	B. LONG TERM AVERAGE VALUE		D. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
g. Nitrogen, Total Organic (as N)	X		0.2	4,223					1	PPM	LBS/DAY	0.9	19,002	1
h. Oil and Grease	X		<3.0	<63,339					1	PPM	LBS/DAY	5.0	105,564	1
i. Phosphorus (as P), Total (7723-14-0)	X		0.08	1,689					1	PPM	LBS/DAY	0.05	1,056	1
j. Radioactivity														
(1) Alpha, Total	X		< 3	—					1	PCl /L	—	< 3	—	1
(2) Beta, Total	X		51+6	—					1	PCl /L	—	47+5	—	1
(3) Radium, Total (6)			—	—					—	—	—	—	—	
(4) Radium 226, Total (6)			—	—					—	—	—	—	—	
k. Sulfate (as SO ₄) (14808-79-8)	X		29	612,277					1	PPM	LBS/DAY	29	612,277	1
l. Sulfide (as S)	X		< 0.1	< 2,111					1	PPM	LBS/DAY	<0.1	<2,111	1
m. Sulfite (as SO ₃) (14265-45-3)	X		<2	<42,226					1	PPM	LBS/DAY	< 2	<42,226	1
n. Surfactants	X		<0.5	< 10,557					1	PPM	LBS/DAY	<0.5	<10,557	1
o. Aluminum, Total (7429-90-5)	X		0.3	6,334					1	PPM	LBS/DAY	0.8	16,890	1
p. Barium, Total (7440-39-3)	X		< 0.1	< 2,111					1	PPM	LBS/DAY	< 0.1	<2,111	1
q. Boron, Total (7440-42-8)	X		< 0.2	< 4,223					1	PPM	LBS/DAY	<0.2	<4,223	1
r. Cobalt, Total (7440-48-4)	X		0.01	211					1	PPM	LBS/DAY	<0.01	< 211	1
s. Iron, Total (7439-89-6)	X		0.78	16,468					1	PPM	LBS/DAY	1.3	27,447	1
t. Magnesium, Total (7439-95-4)	X		6.3	133,012					1	PPM	LBS/DAY	6.3	133,012	1
u. Molybdenum, Total (7439-98-7)	X		< 0.03	< 633					1	PPM	LBS/DAY	<0.03	< 633	1
v. Manganese, Total (7439-96-5)	X		0.05	1,056					1	PPM	LBS/DAY	0.07	1,478	1
w. Tin, Total (7440-31-5)	X		< 1	<21,113					1	PPM	LBS/DAY	< 1	<21,113	1
x. Titanium, Total (7440-32-6)	X		<0.1	< 2,111					1	PPM	LBS/DAY	< 0.1	< 2,111	1

EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
NY0004472	001

Form Approved
OMB No. 2000-0059
Approval expires 12-31-85

CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a (secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions), mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (all 7 pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT						d. NO. OF ANALYSES	4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVG. VALUE (if available)			a. CONCENTRATION	b. MASS	b. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)	X			<0.1	<2,111					1	PPM	LBS/DAY	<0.1	<2,111	1
2M. Arsenic, Total (7440-38-2)	X			<0.001	<21					1	PPM	LBS/DAY	<0.001	<21	1
3M. Beryllium, Total (7440-41-7)	X			<0.002	<42					1	PPM	LBS/DAY	<0.002	<42	1
4M. Cadmium, Total (7440-43-9)	X			<0.005	<106					1	PPM	LBS/DAY	<0.005	<106	1
5M. Chromium, Total (7440-47-3)	X			<0.01	<211					1	PPM	LBS/DAY	<0.01	<211	1
6M. Copper, Total (7440-50-8)	X			0.01	211					1	PPM	LBS/DAY	0.01	211	1
7M. Lead, Total (7439-92-1)	X			<0.03	<633					1	PPM	LBS/DAY	<0.03	<633	1
8M. Mercury, Total (7439-97-6)	X			0.0002	4					1	PPM	LBS/DAY	<0.0002	<4	1
9M. Nickel, Total (7440-02-0)	X			<0.03	<633					1	PPM	LBS/DAY	<0.03	<633	1
10M. Selenium, Total (7782-49-2)	X			<0.004	<84					1	PPM	LBS/DAY	<0.004	<84	1
11M. Silver, Total (7440-22-4)	X			<0.01	<211					1	PPM	LBS/DAY	<0.01	<211	1
12M. Thallium, Total (7440-28-0)	X			<0.1	<2,111					1	PPM	LBS/DAY	<0.1	<2,111	1
13M. Zinc, Total (7440-66-6)	X			0.03	633					1	PPM	LBS/DAY	0.04	845	1
14M. Cyanide, Total (57-12-5)	X			0.011	232					1	PPM	LBS/DAY	0.012	253	1
15M. Phenols, Total	X			0.02	422					1	PPM	LBS/DAY	0.03	633	1
DIOXIN															
2,3,7,8 Tetra chlorodibenzo P. Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	B. TEST- ING RE- QUIR- ED	D. RE- LIEVED PRE- SENT	C. RE- LIEVED AD- SENT	B. MAXIMUM DAILY VALUE		D. MAXIMUM 30 DAY VALUE (if available)		C. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANAL- YSES	B. CONCENTRATION	D. MASS	A. LONG TERM AVERAGE VALUE		D. NO. OF ANAL- YSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)	X			<100	---					1	PPB	---	<100	---	1
2V. Acrylonitrile (107-13-1)	X			<100	---					1	PPB	---	<100	---	1
3V. Benzene (71-43-2)	X			< 5	---					1	PPB	---	< 5	---	1
4V. Bis (Chloro- methyl) Ether (542-88-1) (7)	X			10	---					1	PPB	---	10	---	1
5V. Bromoform (75-25-2)	X			< 5	---					1	PPB	---	< 5	---	1
6V. Carbon Tetrachloride (56-23-5)	X			< 5	---					1	PPB	---	< 5	---	1
7V. Chlorobenzene (108-90-7)	X			< 5	---					1	PPB	---	< 5	---	1
8V. Chlorodi- bromomethane (124-48-1)	X			< 5	---					1	PPB	---	< 5	---	1
9V. Chloroethane (75-00-3)	X			< 10	---					1	PPB	---	< 10	---	1
10V. 2-Chloro- ethylvinyl Ether (110-75-8)	X			< 10	---					1	PPB	---	< 10	---	1
11V. Chloroform (67-66-3)	X			< 5	---					1	PPB	---	< 5	---	1
12V. Dichloro- bromomethane (75-27-4)	X			< 5	---					1	PPB	---	< 5	---	1
13V. Dichloro- difluoromethane (75-71-8) (7)	X			5	---					1	PPB	---	5	---	1
14V. 1,1-Dichloro- ethane (75-34-3)	X			< 5	---					1	PPB	---	< 5	---	1
15V. 1,2-Dichloro- ethane (107-06-2)	X			< 5	---					1	PPB	---	< 5	---	1
16V. 1,1-Dichloro- ethylene (75-35-4)	X			< 5	---					1	PPB	---	< 5	---	1
17V. 1,2-Dichloro- propane (78-87-5)	X			< 5	---					1	PPB	---	< 5	---	1
18V. 1,3-Dichloro- propylene (542-75-6)	X			< 5	---					1	PPB	---	< 5	---	1
19V. Ethylbenzene (100-41-4)	X			< 5	---					1	PPB	---	< 5	---	1
20V. Methyl Bromide (74-83-9)	X			< 10	---					1	PPB	---	< 10	---	1
21V. Methyl Chloride (74-87-3)	X			< 10	---					1	PPB	---	< 10	---	1

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	TESTING RE-REQUIRED	D. RECEIVED PRE-SENT	C. RECEIVED POST-SENT	B. MAXIMUM DAILY VALUE		D. MAXIMUM 30 DAY VALUE (if available)		C. LONG TERM AVG. VALUE (if available)		D. NO. OF ANALYSES	B. CONCENTRATION	D. MASS	B. LONG TERM AVERAGE VALUE		D. NO. OF ANALYSES
				(1) CONCENTRATION	(1) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - VOLATILE COMPOUNDS (continued)															
22V. Methylene Chloride (75-09-2)	X			< 5	---					1	PPB	---	< 5	---	1
23V. 1,1,2,2-Tetrachloroethane (79-34-5)	X			< 5	---					1	PPB	---	< 5	---	1
24V. Tetrachloroethylene (127-18-4)	X			< 5	---					1	PPB	---	< 5	---	1
25V. Toluene (108-88-3)	X			< 5	---					1	PPB	---	< 5	---	1
26V. 1,2-Trans-Dichloroethylene (156-60-5)	X			< 5	---					1	PPB	---	< 5	---	1
27V. 1,1,1-Trichloroethane (71-55-6)	X			< 5	---					1	PPB	---	< 5	---	1
28V. 1,1,2-Trichloroethane (79-00-5)	X			< 5	---					1	PPB	---	< 5	---	1
29V. Trichloroethylene (79-01-6)	X			< 5	---					1	PPB	---	< 5	---	1
30V. Trichlorofluoromethane (75-69-4)	X			< 5	---					1	PPB	---	< 5	---	1
31V. Vinyl Chloride (75-01-4)	X			< 10	---					1	PPB	---	< 10	---	1
GC/MS FRACTION - ACID COMPOUNDS															
1A. 2-Chlorophenol (95-67-8)	X			< 10	---					1	PPB	---	< 10	---	1
2A. 2,4-Dichlorophenol (120-83-2)	X			< 10	---					1	PPB	---	< 10	---	1
3A. 2,4-Dimethylphenol (105-67-9)	X			< 10	---					1	PPB	---	< 10	---	1
4A. 4,6-Dinitro-O-Cresol (534-52-1)	X			< 50	---					1	PPB	---	< 50	---	1
5A. 2,4-Dinitrophenol (51-28-5)	X			< 50	---					1	PPB	---	< 50	---	1
6A. 2-Nitrophenol (88-75-5)	X			< 10	---					1	PPB	---	< 10	---	1
7A. 4-Nitrophenol (100-02-7)	X			< 50	---					1	PPB	---	< 50	---	1
8A. P-Chloro-M-Cresol (59-50-7)	X			< 10	---					1	PPB	---	< 10	---	1
9A. Pentachlorophenol (87-86-5)	X			< 50	---					1	PPB	---	< 50	---	1
10A. Phenol (108-95-2)	X			< 10	---					1	PPB	---	< 10	---	1
11A. 2,4,6-Trichlorophenol (88-06-2)	X			< 10	---					1	PPB	---	< 10	---	1

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	B. TEST ING RE- QUIR- ED	D. BE- LIEVED PRE- SENT	C. BE- LIEVED AB- SENT	8. MAXIMUM DAILY VALUE		D. MA- XIMUM 30 DAY VALUE (if available)		C. LONG TERM AVG. VALUE (if available)		D. NO. OF ANAL- YSES	A. CONCENTRATION	D. MASS	B. LONG TERM AVERAGE VALUE		D. NO. OF ANAL- YSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)	X			< 10	---					1	PPB	---	<10	---	1
2B. Acenaphthylene (208-96-8)	X			< 10	---					1	PPB	---	<10	---	1
3B. Anthracene (120-12-7)	X			< 10	---					1	PPB	---	<10	---	1
4B. Benzidine (92-87-5)	X			< 50	---					1	PPB	---	<50	---	1
5B. Benzo (a) Anthracene (56-55-3)	X			< 10	---					1	PPB	---	<10	---	1
6B. Benzo (a) Pyrene (50-32-8)	X			< 10	---					1	PPB	---	<10	---	1
7B. 3,4-Benzo- fluoranthene (205-99-2)	X			< 10	---					1	PPB	---	<10	---	1
8B. Benzo (ghi) Perylene (191-24-2)	X			< 10	---					1	PPB	---	<10	---	1
9B. Benzo (k) Fluoranthene (207-08-9)	X			< 10	---					1	PPB	---	<10	---	1
10B. Bis (2-Chloro- ethoxy) Methane (111-91-1)	X			< 10	---					1	PPB	---	<10	---	1
11B. Bis (2-Chloro- ethyl) Ether (111-44-4)	X			< 10	---					1	PPB	---	<10	---	1
12B. Bis (2-Chloroiso- propyl) Ether (102-60-1)	X			< 10	---					1	PPB	---	<10	---	1
13B. Bis (2-Ethyl- hexyl) Phthalate (117-81-7)	X			< 10	---					1	PPB	---	<10	---	1
14B. 4-Bromo- phenyl Phenyl Ether (101-55-3)	X			< 10	---					1	PPB	---	<10	---	1
15B. Butyl Benzyl Phthalate (85-68-7)	X			< 10	---					1	PPB	---	<10	---	1
16B. 2-Chloro- naphthalene (91-58-7)	X			< 10	---					1	PPB	---	<10	---	1
17B. 4-Chloro- phenyl Phenyl Ether (7005-72-3)	X			< 10	---					1	PPB	---	<10	---	1
18B. Chrysene (218-01-9)	X			< 10	---					1	PPE	---	<10	---	1
19B. Dibenzo (a,h) Anthracene (53-70-3)	X			< 10	---					1	PPB	---	<10	---	1
20B. 1,2-Dichloro- benzene (95-50-1)	X			< 10	---					1	PPB	---	<10	---	1
21B. 1,3-Dichloro- benzene (541-73-1)	X			< 10	---					1	PPB	---	<10	---	1

CONTINUED FROM PAGE V-6

1. POLLUTANT AND CAS NUMBER <i>(if available)</i>	2. MARK 'X'			3. EFFLUENT						4. UNITS		5. INTAKE <i>(optional)</i>			
	A. TEST- ING RE- QUIRED	B. BE- LIEVED PRE- SENT	C. BE- LIEVED AB- SENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE <i>(if available)</i>		c. LONG TERM AVRG. VALUE <i>(if available)</i>		d. NO. OF ANAL- YSES	e. CONCENT- RATION	f. MASS	g. LONG TERM AVERAGE VALUE		h. NO. OF ANAL- YSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENT- RATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS <i>(continued)</i>															
22B. 1,4-Dichloro- benzene (106-46-7)	X			< 10	---					1	PPB	---	< 10	---	1
23B. 3,3'-Dichloro- benzidine (91-94-1)	X			< 20	---					1	PPB	---	< 20	---	1
24B. Diethyl Phthalate (84-66-2)	X			< 10	---					1	PPB	---	< 10	---	1
25B. Dimethyl Phthalate (131-11-3)	X			< 10	---					1	PPB	---	< 10	---	1
26B. Di-N-Butyl Phthalate (84-74-2)	X			< 10	---					1	PPB	---	< 10	---	1
27B. 2,4-Dinitro- toluene (121-14-2)	X			< 10	---					1	PPB	---	< 10	---	1
28B. 2,6-Dinitro- toluene (606-20-2)	X			< 10	---					1	PPB	---	< 10	---	1
29B. Di-N-Octyl Phthalate (117-84-0)	X			< 10	---					1	PPB	---	< 10	---	1
30B. 1,2-Diphenyl- hydrazine <i>(as Azo- benzene)</i> (122-66-7)	X			< 20	---					1	PPB	---	< 20	---	1
31B. Fluoranthene (206-44-0)	X			< 10	---					1	PPB	---	< 10	---	1
32B. Fluorene (86-73-7)	X			< 10	---					1	PPB	---	< 10	---	1
33B. Hexachlorobenzene (118-74-1)	X			< 10	---					1	PPB	---	< 10	---	1
34B. Hexa- chlorobutadiene (87-68-3)	X			< 10	---					1	PPB	---	< 10	---	1
35B. Hexachloro- cyclopentadiene (77-47-4)	X			< 10	---					1	PPB	---	< 10	---	1
36B. Hexachloro- ethane (67-72-1)	X			< 10	---					1	PPB	---	< 10	---	1
37B. Indeno <i>(1,2,3-cd)</i> Pyrene (193-39-5)	X			< 10	---					1	PPB	---	< 10	---	1
38B. Isophorone (78-59-1)	X			< 10	---					1	PPB	---	< 10	---	1
39B. Naphthalene (91-20-3)	X			< 10	---					1	PPB	---	< 10	---	1
40B. Nitrobenzene (98-95-3)	X			< 10	---					1	PPB	---	< 10	---	1
41B. N-Nitro- sodimethylamine (62-75-9)	X			< 10	---					1	PPB	---	< 10	---	1
42B. N-Nitrosodi- N-Propylamine (621-64-7)	X			< 10	---					1	PPB	---	< 10	---	1

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. TEST- ING RE- QUIRED	b. BE- LIEVED PWA SENT	c. BE- LIEVED AS SENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVG. VALUE (if available)		d. NO. OF ANAL- YSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANAL- YSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS (continued)															
43B. N-Nitro- sodiphenylamine (86-30-6)	X			< 10	---					1	PPB	---	< 10	---	1
44B. Phenanthrene (85-01-8)	X			< 10	---					1	PPB	---	< 10	---	1
45B. Pyrene (129-00-0)	X			< 10	---					1	PPB	---	< 10	---	1
46B. 1,2,4 - Tri- chlorobenzene (120-82-1)	X			< 10	---					1	PPB	---	< 10	---	1
GC/MS FRACTION - PESTICIDES (8)															
1P. Aldrin (309-00-2)		X											X		
2P. α -BHC (319-84-6)		X											X		
3P. β -BHC (319-85-7)		X											X		
4P. γ -BHC (58-89-9)		X											X		
5P. δ -BHC (319-86-8)		X											X		
6P. Chlordane (57-74-9)		X											X		
7P. 4,4'-DDT (50-29-3)		X											X		
8P. 4,4'-DDE (72-85-9)		X											X		
9P. 4,4'-DDD (72-54-8)		X											X		
10P. Dieldrin (60-57-1)		X											X		
11P. α -Endosulfan (115-29-7)		X											X		
12P. β -Endosulfan (115-29-7)		X											X		
13P. Endosulfan Sulfate (1031-07-8)		X											X		
14P. Endrin (72-20-8)		X											X		
15P. Endrin Aldehyde (7421-93-4)		X											X		
16P. Heptachlor (76-44-8)		X											X		

CONTINUED FROM PAGE V-8

EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
NY0004472	001

Form Approved
OMB No. 2000-0059
Approval expires 12-31-85

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	A. TESTING EQUIPMENT	B. BELIEVED PRESENT	C. BELIEVED ABSENT	B. MAXIMUM DAILY VALUE		D. MAXIMUM 30 DAY VALUE (if available)		C. LONG TERM AVG. VALUE (if available)		D. NO. OF ANALYSES	B. CONCENTRATION	D. MASS	E. LONG TERM AVERAGE VALUE		D. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - PESTICIDES (continued)															
17P. Heptachlor Epoxide (1024-57-3)		X												X	
18P. PCB-1242 (9) (53469-21-9)		X		< 0.5	---					1	PPB	LBS	< 5.0	---	1
19P. PCB-1254 (11097-69-1) (9)		X		< 1.0	---					1	PPB	LBS	< 10.0	---	1
20P. PCB-1221 (9) (11104-28-2)		X		< 0.5	---					1	PPB	LBS	< 5.0	---	1
21P. PCB-1232 (9) (11141-16-5)				< 0.5	---					1	PPB	LBS	< 5.0	---	1
22P. PCB-1248 (9) (12672-29-6)		X		< 0.5	---					1	PPB	LBS	< 5.0	---	1
23P. PCB-1260 (9) (11098-82-5)		X		< 1.0	---					1	PPB	LBS	< 10.0	---	1
24P. PCB-1016 (9) (12674-11-2)		X		< 0.5	---					1	PPB	LBS	< 5.0	---	1
25P. Toxaphene (8001-35-2)		X												X	

PAGE V-9

EPA Form 3510-2C (Rev. 4-84)

Footnotes
Item V. To Application Form 2C
Intake and Effluent Characteristics
Indian Point Generating Station Unit Nos. 2 and 3
SPDES Permit No. NY0004472

1. The maximum daily flow value, maximum 30 day flow value, and long term average flow value are based upon Indian Point Generating Station pump flows contained within the December 19, 1980 Hudson River Settlement Agreement and assumed Unit Nos. 2 and 3 maximum design service water pump flows and a Unit No.1 16,000 gpm service water pump flow. The long term average intake flow is approximately equal to the long term average discharge flow of 1,949 MGD. However, for uniformity of intake and discharge mass value computations, the maximum daily discharge value of 2,530 MGD is reported for the long term average intake flow and is used to calculate the intake mass values.
2. The maximum daily temperature value, maximum 30 day temperature value, and long term average temperature value (intake and discharge) for the winter months (January, February, and March) are based on 1983 to 1985 continuous intake and discharge temperature monitoring data.
3. The maximum daily temperature value, maximum 30 day temperature value, and long term average temperature value (intake and discharge) for the summer months (July, August, and September) are based on 1983 to 1985 continuous intake and discharge temperature monitoring data.

Footnotes
Item V. To Application Form 2C
Intake and Effluent Characteristics
Indian Point Generating Station Unit Nos.2 and 3
SPDES Permit No. NY0004472

4. The minimum and maximum daily pH values and minimum and maximum 30 day pH values are based on monthly pH monitoring data for the period January 1983 to September 1985, inclusive.

5. Condenser cooling water is currently not chlorinated at the Indian Point Generating Station. On February 24, 1984, DEC approved continuous low-level chlorination of the Indian Point Unit No.2 service water system. That approval, which was confirmed by a March 6, 1984 letter from Robert T. Keegan of Con Edison to Skip Shoemaker of DEC's Industrial Inorganics Section, required determination of discharge total residual chlorine (TRC) values by taking at least one daily grab sample in the service water effluent system and multiplying that value by the ratio of Unit No. 2 service water flow to total Station discharge flow. Pursuant to that approval, Con Edison began semi-continuous service water chlorination on March 7, 1984 and continuous service water chlorination on May 4, 1984. On August 15, 1984, DEC approved short-term (up to 24 hours), high-level chlorination of the Unit No. 2 service water. That approval, which was confirmed by an August 20, 1984 letter from Mr. Keegan to Mr. Shoemaker, required measurement of TRC concentrations at Discharge 001 at least once every 30 minutes during high-level chlorination. Pursuant to that approval, Con Edison performed a short-term, high level chlorination on October 10, 1984.

Footnotes
Item V. To Application Form 2C
Intake and Effluent Characteristics
Indian Point Generating Station Unit Nos. 2 and 3
SPDES Permit No. NY0004472

Approvals for other short-term, high-level chlorinations were granted on November 16, 1984 and January 17, 1985 and confirmed in letters to Mr. Shoemaker on November 20, 1984 and January 29, 1985, respectively. On January 29, 1985, Con Edison requested and on February 25, 1985, DEC approved (per letter from Walter E. Loveridge of DEC's Industrial Inorganics Section), short-term, high-level chlorination up to 4 times per quarter and 12 times per year.

Maximum 30 day and long-term average values (<0.1 mg/l) reported for TRC in Part V-B reflect conditions during low-level service water chlorination. The concentration reported for maximum daily value (0.45 mg/l) was determined during a high-level chlorination and is based on samples taken in Con Edison's discharge (Unit Nos. 1 and 2) multiplied by the ratio of Con Edison's discharge flow to the total Discharge 001 flow (Unit Nos. 1, 2 and 3). The highest TRC concentration measured at Discharge 001 during high-level chlorination was 0.3 mg/l.

Footnotes
Item V. To Application Form 2C
Intake and Effluent Characteristics
Indian Point Generating Station Unit Nos. 2 and 3
SPDES Permit No. NY0004472

The intake long term average total residual chlorine concentration (<0.1 mg/l) is presumed to be the background total residual chlorine concentration of the Hudson River.

6. Total Radium and Total Radium 226 concentrations are not measurable since the Total Alpha concentration was less than 5 pCi/l.
7. EPA has removed Bis(chloromethyl) Ether (Federal Register Vol.46, No.23, February 4, 1981) and Dichlorodifluoromethane and Trichlorofluoromethane (Federal Register Vol.46, No.5, January 8, 1981) from the toxic pollutants list established under Section 307(a)(1) of the Clean Water Act.
8. The analysis of pesticides (GC/MS Fraction - Pesticides) is not required for steam electric power plants (See Form 2C Instructions, Table 2C-2). PCB analysis was performed due to their possible presence in the Hudson River. For all pesticides, including PCBs, their presence in the discharge would be solely due to their presence in the intake water.

Footnotes
Item V. To Application Form 2C
Intake and Effluent Characteristics
Indian Point Generating Station Unit Nos.2 and 3
SPDES Permit No. NY0004472

9. PCBs were not detected in either the intake or discharge samples. Since interference in the intake PCB samples necessitated a ten to one (10:1) dilution of these samples prior to analysis, the reported detection limits for the PCB concentrations in the intake are ten (10) times the reported detection limits for the PCB concentrations in the discharge. However, PCBs are not added or removed by the Station and the actual intakes PCB concentrations should be less than the lower detection limits specified for the discharge.

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
STATE POLLUTANT DISCHARGE ELIMINATION SYSTEM (SPDES)
Supplement to EPA Application Form 2C
Steam Generating Facility SIC 4911

1. Facility Description:

Type of Plant: Baseload - X
 Peaking
 Steam Heating

Capacity Factor
(Present):

Unit No. 2: 46.3% (1984) and 88.8% (1985)
 based on an 864 Net MWe
 Maximum Dependable Capacity

Unit No.3: 71.3% (1984) and 55.9% (1985)
 based on a 965 Net MWe
 Maximum Dependable Capacity.

Capacity Factor
(Future):

Unit No.2: 72%
Unit No.3: 72%

Retirement Dates: The NRC operating licenses for the
 Station will expire after the SPDES
 renewal permit, which is the subject of
 this application.

2. Thermal Discharges:

Provide the following information and specify which
outfall(s) it relates to:

- a. Discharge temperatures. Include 5% and 1% exceedance
and maximum.

For the period January 1983 to September 1985
(inclusive), the discharge temperatures recorded for
Outfall 001 were:

- o Maximum: 104.0°F
- o 1% Exceedance: 100.4°F

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

o 5% Exceedance: 99.8°F

- b. Range of measured discharge temperature differentials above receiving water. Include maximum differential for winter and summer.

For the period January 1983 to September 1985 (inclusive), the range of measured discharge temperature differentials recorded for Outfall 001 above the receiving water were:

	<u>Minimum</u>	<u>Maximum</u>
o Winter (January, February, March)	0.1°F	41.3°F
o Summer (July, August, September)	0.1°F	23.4°F

- c. Type of cooling used (that is, once-through, cooling towers, etc.).

Both Unit Nos. 2 and 3 use once-through cooling.

- d. Discharge and intake configuration in plan and profile, showing fluctuations in water levels due to seasonal conditions and tidal variations. Include distance from shore in drawings.

See EPA Form 1, Figures 1 to 9, inclusive.

- e. Maximum rate of temperature change at the point of discharge (planned and emergency shutdown).

Review of the Station's records indicate the following:

<u>Condition</u>	<u>Maximum Rate of Temperature Change</u>
Emergency Shutdown	13.8°F/Hr.
Planned Shutdown	5.5°F/Hr.

- f. Chemical additives: (list any not included in ICS).

See Attached Table 1 "Indian Point Generating Station Chemical Additives".

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

- g. Steam condenser tube material and feedwater heater tube material.

Unit No.2:

- o Steam Condenser Tube Material - Admiralty Brass
- o Feedwater Heaters Tube Material- Stainless Steel, 80-20 Copper-Nickel, and 90-10 Copper-Nickel.

Unit No.3:

- o Steam Condenser Tube Material - Titanium Grade 2
- o Feedwater Heater Tube Material - Stainless Steel and Admiralty Brass

3. Material Storage:

For any runoff or leachate from any material storage and disposal areas (such as: coal and ash piles, sludge storage etc.) or drainage from any contaminated yard areas, (transformer areas) attach a brief description of types and quantities of materials stored, size of storage area, design and actual flows, type of treatment, wastewater characteristics (include metals, pH, sulfides) and show the location of any discharge points on the site drawing required by EPA Form 2C. Indicate the handling method for ash and pyrites.

None.

4. Effluent Source:

For each of the outfalls described in EPA Form 2C, indicate the wastewater substreams that comprise the discharge (i.e floor drains, bottom ash transport water, cooling tower blowdown etc.). (Section 2C-II).

See EPA Form 2C, Item II and its attached Exhibit Nos. 1 and 2.

5. Sludge Removal and Disposal:

If sludge is created as a result of processing or treatment,

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

describe quantities produced per year and briefly indicate how and where it will be disposed of.

All radioactive waste treatment sludge is removed and disposed of in accordance with Nuclear Regulatory Commission regulations. The only other sludge produced is sanitary waste treatment sludge (11,800 cubic feet in 1984). Removal and disposal is by commercial septic waste hauler.

6. Plant Fuel:

Indicate the types and quantities of fuel(s) burned per year. Include sulfur content.

Unit No.2 (1984 Data):

- o Uranium Dioxide: Fuel usage, effluents and disposal are regulated by the Nuclear Regulatory Commission pursuant to the Federal Atomic Energy Act.
- o Oil: 1,515,725 gallons of No.6 fuel oil (0.37% sulfur by weight).
70,167 gallons of No.2 fuel oil (0.20% sulfur by weight).

Unit No.3 (1984 Data):

- o Uranium Dioxide: Fuel usage, effluents and disposal are regulated by the Nuclear Regulatory Commission pursuant to the Federal Atomic Energy Act.
- o Oil: 1,344,132 gallons of No.6 fuel oil (0.37% sulfur by weight).
10,800 gallons of No.2 fuel oil (0.30 % sulfur by weight).

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

7. Discharge Termination:

Locate on site drawing or flow diagram any discharge points which have been sealed or cut since the effective date of the existing permit.

None.

8. Studies and Reports:

Summarize the status and results of any engineering reports and/or aquatic monitoring studies required by the existing permit.

a. MONITORING PROGRAM REPORTS

Completed and submitted to NYSDEC

1981 Monitoring Program

Hudson River Ecological Study in the Area of Indian Point. 1981 Annual Report. (February 1984)

Gear Comparability Study for Entrainment Sampling of Juvenile Fish at the Indian Point Station, 1981. (June 1982)

1982 Monitoring Program

Hudson River Ecological Study in the Area of Indian Point. 1982 Annual Report. (February 1984)

Stock Characteristics of the Hudson River Atlantic Tomcod Population During the 1980-1981 and 1981-1982 Spawning Seasons. (January 1983)

Abundance and Stock Characteristics of the Atlantic Tomcod (Microgadus Tomcod) Spawning Population in the Hudson River, Winter 1982-1983. (January 1984)

1980 and 1981 Year Class Report for the Hudson River Estuary Monitoring Program. (December 1983)

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

1979 and 1980 Data Analyses and Application of Empirical Models of Hudson River Fish Populations. (August 1983)

Optimum Deployment and Relative Catch Efficiency of a 3 Meter Beam Trawl for Quantitative Fisheries Sampling in the Hudson River Estuary. (November 1982)

Review and Evaluation of Fish Marking Techniques. (April 14, 1983)

Age, Growth and Population Dynamics of White Perch, (Morone Americana, Gmelin) in Haverstraw Bay, Hudson River, New York. (December 1982)

Relative Sensitivity of Hudson River Striped Bass to Competing Sources of Exploitation and the Implications for Monitoring Programs. (1982)

1983 Monitoring Program

Hudson River Ecological Study in the Area of Indian Point. 1983 Annual Report. (June 1984)

Precision and Accuracy of Stratified Sampling to Estimate Fish Impingement at Indian Point Unit No. 2 and Unit No. 3. (November 1984)

1982 Year Class Report for the Hudson River Estuary Monitoring Program. Volumes 1, 2 and 3. (February 1985)

1983 Year Class Report for the Hudson River Estuary Monitoring Program. Volumes 1, 2 and 3. (April 1985)

Methods for Defining and Evaluating Assessment Levels to Determine Outage Effectiveness for Entrainment Reduction. (March 1984)

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

Abundance and Stock Characteristics of
the Atlantic Tomcod (Microgadus Tomcod)
Spawning Population in the Hudson River.
Winter 1983-1984. (September 1984)

Relative Catch Efficiency of a 3m Beam²
Trawl, a 6.2m High-Rise Trawl and a 1.0 m²
Epibenthic Sled for Sampling Young of the
Year Striped Bass and Other Fishes in the
Hudson River Estuary. (January 1985)

Indian Point Generating Station Entrainment
Abundance and Outage Evaluation. 1983
Annual Report. (September 1984)

Letter Report to New York State Department
of Environmental Conservation Specifying
Results of Hatchery Striped Bass Tag
Retention Study.

1984 Monitoring Program

Hudson River Ecological Study in the Area of
Indian Point. 1984 Annual Report.
(July 1985)

Indian Point Generating Station Entrainment
Abundance and Outage Evaluation. 1984 Annual
Report. (July 1985)

Ichthyoplankton Gear Evaluation Studies 1984.
(March 1985)

Final Report for the 1983-1984 Hudson River
White Perch Stock Assessment Study.
(July 1985)

A Critical Review of Thermal Modeling Studies.
(July 1985)

Adult Striped Bass Tagging Program Spring 1984.
(January 1985)

Draft Procedures Manual. Striped Bass
Hatchery Fish Tagging Program. July, 1985.

1985 Monitoring Program

Letter Report to New York State Department
of Environmental Conservation specifying
results of hatchery striped bass tag
retention study. (February 1984).

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

Studies In Progress

1983 Monitoring Program

Evaluation of Entrainment Abundance
Sampling Designs.

1984 Monitoring Program

1984 Year Class Report for the Hudson
River Estuary Monitoring Programs.
Volumes 1 and 2.

Evaluating the Effectiveness of Outages:
Enumeration and Review of Statistical
Estimators for Biological Parameters.

Size Selectivity and Relative Catch Efficiency
of a 3M Beam Trawl and a 1.0 M² Epibenthic Sled
for Sampling Young of the Year Striped Bass
and Other Fishes in the Hudson River.

1985 Monitoring Program

Hudson River Ecological Study in the Area
of Indian Point. 1985 Annual Report.

Indian Point Generating Station Entrainment
Abundance and Outage Evaluation. 1985
Annual Report.

Indian Point Generating Station Entrainment
Survival 1985.

Evaluating the Effectiveness of Outages
- Phase II.

1985 Year Class Report for the Hudson River
Estuary Monitoring Program.

Abundance and Stock Characteristics of the
Atlantic Tomcod (Microgadus Tomcod) Spawning
Population in the Hudson River.
Winter 1985 - 1986.

Striped Bass Hatchery Evaluation and Adult
Stock Assessment.

Evaluation of the Influence of Hatchery -
Reared Striped Bass on the Hudson River
Population.

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

b. ANGLED SCREEN STUDIES

Completed and Submitted to NYSDEC

Indian Point Unit 2 Angled Screen Intake
Structure Favored Concept Design.

Evaluation of Alternatives to Angled Screens
for Mitigation of Fish Impingement at Indian
Point. (August 1984).

Letter Report on Preliminary Analyses of
Ristroph Screen Operation at Indian Point Unit
2.

Biological Evaluation of A Ristroph Screen at
Indian Point Unit 2. (June 1985).

Letter Report on Ancillary Data Collected
During Ristroph Screen Studies at Indian Point.

Studies in Progress

Evaluation of Location for Fish Return Line for
Ristroph Modified Traveling Screen System at Indian
Point Unit Nos. 2 and 3.

c. HATCHERY REPORTS

Completed and Submitted to NYSDEC

Striped Bass Hatchery Design and Operation
Plans.

Striped Bass Hatchery Annual Production
Report for 1983.

Striped Bass Hatchery Annual Production
Report for 1984.

Striped Bass Hatchery Annual Production
Report for 1985.

Hudson River Striped Bass Hatchery Design
Through First Year of Operation.
February 1984.

Hudson River Striped Bass Hatchery -
1984 Overview. (February 1985).

Studies in Progress

Hudson River Striped Bass Hatchery.
1985 Overview.

INDIAN POINT GENERATING STATION
UNIT NOS. 2 AND 3
SPDES PERMIT NO. NY0004472

d. SETTLEMENT AGREEMENT ANNUAL REPORTS

Con Edison's Settlement Agreement Annual Reports.

For the year ending October 31, 1981
For the year ending October 31, 1982
For the year ending October 31, 1983
For the year ending October 31, 1984
For the year ending October 31, 1985

New York Power Authority's Settlement Agreement Annual Reports.

For the year ending October 31, 1981
For the year ending October 31, 1982
For the year ending October 31, 1983
For the year ending October 31, 1984
For the year ending October 31, 1985

9. Permit Violations:

Summarize any permit violations during the period of this permit and indicate any corrective action taken to eliminate them and the probability of reoccurrence.

Excursions above permit limitations have occurred for internal waste stream 001A, which consists of treated effluent from the on-site sewage treatment plant. (The sewage treatment plant is owned and operated by the New York Power Authority.) Excursions occurred primarily for total daily flow, which is currently limited to 20,000 gallons per day. Excursions above flow limitations are not substantive violations of permit limitations and do not reflect either the actual operating capacity of the sewage treatment plant or the present site population. On occasion, excursions above permit limitations for settleable solids, BOD₅, pH, suspended solids, and fecal coliform have occurred. These excursions were reported in writing to the DEC during the week in which they occurred. Of these, settleable solids excursions accounted for the majority of excursions associated with operational parameters other than flow.

Presently, two mitigation alternatives are being considered: (1) connection to publicly owned treatment works, and (2) modification of the existing on-site sanitary treatment facilities.

Table 1

INDIAN POINT GENERATING STATION
CHEMICAL ADDITIVES

<u>Name of Substances</u>	<u>1984 Annual Usage</u>	<u>Amount on Hand</u>
Aluminum Sulfate ⁽¹⁾ (Alum)	0 lbs	700 lbs
Ammonium Hydroxide (30%)	350 gal	108 gal
Boric Acid	153,550 lbs	60,375 lbs
Cyclohexylamine ⁽²⁾	0 gal	100 gal
Disodium Phosphate	5,668 lbs	1,600 lbs
Drewgard 100	163 gal	220 gal
Hydrazine	7,292 gal	2,776 gal
Laundry Detergent ⁽²⁾	0 lbs	100 lbs
Lithium Hydroxide	44 lbs	100 lbs
Mogul WS 144 ⁽³⁾	0 lbs	0 lbs
Potassium Chromate ⁽⁴⁾	368 lbs	90 lbs
Potassium Dichromate ⁽⁴⁾		56 lbs
Potassium Hydroxide	21 gal	24 gal
Sodium Carbonate	4,600 lbs	1,000 lbs
Sodium Hydroxide ⁽⁵⁾ (50%)	43,686 gal	6,300 gal
Sodium Hypochlorite ⁽²⁾ (15%)	28,240 gal	6,350 gal
Sodium Sulfite ⁽²⁾	0 lbs	100 lbs
Sulfuric Acid ⁽⁵⁾ (93%)	30,657 gal	13,300 gal
Trisodium Phosphate	200 lbs	400 lbs

- NOTES:
- (1) Current usage is approximately 10,400 lbs/yr.
 - (2) These chemicals were not used in 1984 but may be used in the future.
 - (3) Mogul WS144 may be used in the future as a replacement chemical for Drewgard 100.
 - (4) 368 lbs. represents the total quantity of potassium chromate and potassium dichromate used during 1984.
 - (5) An additional 144,563 gal/yr. of Sodium Hydroxide and 39,464 gal/yr. of Sulfuric Acid will be used when the new Indian Point Unit No.3 condensate polisher facility becomes operational.

New York State Department of Environmental Conservation
50 Wolf Road, Albany, New York 12233



HENRY G. WILLIAMS
Commissioner

N Y S D E C

State Pollutant Discharge Elimination System (SPDES)
Industrial Chemical Survey

The Industrial Chemical Survey (ICS) was initially sent to many industries in a mass mailing in 1976 and 1977. The ICS form has since been made a part of the SPDES renewal application to obtain from all industries an update of information for use in preparation of your SPDES permit.

Attached is the Industrial Chemical Survey Form, including the list of Substances of Concern. You are asked to review the list carefully. Note that there are broad classes of compounds and that the list used in the original and subsequent mailings has been expanded to include metals. It should also be noted that virtually all water treatment chemicals and additives are substances of concern and should be reported on Part III, and indicated as a water treatment chemical under Purpose or Use.

If the information on your most recently submitted Survey adequately reflects the attached survey, alternatively you may complete the statement below and return this page with your SPDES application.

Note: The period for which information is requested is the past five years, not "since January 1, 1971" as stated on Part III, line 1 of the questionnaire.

We hereby state that our previous Industrial Chemical Survey, referenced below, adequately reflects current usage of the list of Substances of Concern received with this application, with the exception of the substances and amounts specified on the attached ICS Form. Updated information is also provided concerning waste transporters.

Signature

Date

11/17/86

Name

John A. Nutant

Vice President

Title Environmental Affairs

Date of Previous Survey

August 31, 1984 (submitted to
NYSDEC/RIK Processing Unit)

91-15-5(5/83)

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
ALBANY, NEW YORK 12233

INDUSTRIAL CHEMICAL SURVEY

PART I

Please refer to
attached table I

PLEASE COMPLETE AND RETURN TO THE ABOVE ADDRESS, ATTENTION: INDUSTRIAL CHEMICAL SURVEY.

COMPANY NAME <u>Consolidated Edison Company of New York, Inc.</u>		SIC CODE (If known) <u>4911</u>	OFFICE USE ONLY
COMPANY MAILING ADDRESS <u>4 Irving Place, Room 300</u>		CITY <u>New York</u>	STATE <u>N.Y.</u>
PLANT NAME (If different) <u>Indian Point</u>		CONTACT NAME <u>Robert T. Keegan</u>	TELEPHONE Area <u>(212)</u> <u>460-4833</u>
PLANT ADDRESS (If different) Street <u>Broadway and Bleakley Ave.</u>		CITY <u>Buchanan</u>	STATE <u>N.Y.</u>
PRINCIPAL BUSINESS OF PLANT <u>Electric Generation</u>		ZIP CODE <u>10003</u>	ZIP CODE <u>10511</u>

NOTE: (If parent company, give name and addresses of all divisions, subsidiaries, etc., located in New York State. A separate questionnaire is to be completed and submitted for each.)

PART II
Discharge Information

WATER	1. Does your plant discharge liquid wastes to a municipally owned sanitary sewer system? Name of System _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2. Is your facility permitted to discharge liquid wastes under a State (SPDES) or Federal (NPDES) permit? Permit Number <u>0004472</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	3. Do you discharge liquid wastes in any other manner? Explain <u>Sanitary waste septic system-SPDES Permit No. NY0147711</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If any of the above are "Yes": a. Do you discharge process or chemical wastes - (i.e. water used in manufacturing including direct contact cooling water and scrubber water)? b. Do you discharge non-contact cooling water? c. Do you discharge collected storm drainage only? d. Do you discharge sanitary wastes only?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
AIR	1. Does your facility have sources of possible emissions to the atmosphere?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	2. Enter Location and Facility Code as shown on your Air Pollution Control Application for Permits and Certification (If applicable) <u>5522011504</u>	
SOLID & CONCENTRATED LIQUID WASTES	1. List Name and Address of Firm (Including yourself) removing wastes other than office and cafeteria refuse. Name <u>Consolidated Edison Company of New York, Inc.</u> Address <u>4 Irving Place, New York</u> City <u>N.Y.</u> State <u>N.Y.</u> Zip Code <u>10003</u> Name <u>See Attached List</u> Address _____ City _____ State _____ Zip Code _____	Active <input type="checkbox"/> Inactive <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	2. List Location(s) of Landfill(s) owned and used by your facility. 1 <u>None</u> 2 _____	
PESTICIDES	1. Does this facility: Manufacture Pesticides or Pesticide Product Ingredients? Produce Pesticides or Pesticide Product Ingredients? Formulate Pesticides? Repackage Pesticides?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2. EPA Establishment Number <u> </u> - <u> </u> - <u> </u>	

SUBSTANCES OF CONCERN
(Refer to attached TABLE I)

NAME OF SUBSTANCE	CODE	AVERAGE ANNUAL USAGE*	AMOUNT NOW ON HAND	(✓)		PURPOSE OF USE (State whether produced, reacted, blended, packaged, distributed, no longer used, etc.)
				GAL.	LB.	
Aluminum Sulfate	M99	0**	400	X	8	(Filter Aid)
Asbestos	G01	217***	0		8	(Insulator)
Boric Acid	M99	77,500	10,000	X	8	(Neutron Absorber)
Disodium Phosphate	M99	5,468	1,000	X	8	(Water Treatment)
Lithium Hydroxide	M99	22	50	X	8	(pH Modulator)
Potassium Chromate/Dichromate	M05	300	100	X	8	(Corrosion Inhibitor)
Trisodium Phosphate	M99	0*****	300	X	7	
Sodium Hypochlorite	C99	27,640	6,000	X	8	(Biocide)

*1984 Usage.

***Cubic yards removed.

****May be used in future.

NAME OF SUBSTANCE	AVERAGE ANNUAL USAGE *	AMOUNT NOW ON HAND	(✓)		PURPOSE OF USE (State whether produced, reacted, blended, packaged, distributed, no longer used, etc.)
			GAL.	LB.	
Drewgard 100	55	55	X		Drew Chemical Co. 8 (Water Treatment)
#1984 usage.					

SIGNATURE (Owner, Partner, or Officer)

DATE _____

AME (Printed or Typed)

John A. Nutant

TITLE

Vice President, Environmental Affairs

ATTACHMENT

INDUSTRIAL CHEMICAL SURVEY
NAMES AND ADDRESSES OF ADDITIONAL FIRMS REMOVING WASTES*
INDIAN POINT GENERATING STATION UNITS 1&2
SPDES PERMIT NO NY0004472

1. HB Waste Oil
24-16 95th Street
East Elmhurst, New York 11369
2. Chemical Waste Disposal Corporation
42-14 19th Avenue
Astoria, New York 11105
3. S&W Waste
53 Pennsylvania Avenue
South Kearny, New Jersey 07032
4. Magna Carting
P.O. Box 114
Mount Kisco, New York 10549
5. Nappi Trucking
P.O. Box 510
Matawan, New Jersey 07747
6. West Central Environmental Corp.
P.O. Box 83
Rensselaer, New York 12144

*Transporters of radioactive waste material are not identified since disposal of such material is regulated by the Nuclear Regulatory Commission pursuant to the Federal Atomic Energy Act. Transporters of other material may change from year to year depending on contractual arrangements.



HENRY G. WILLIAMS
Commissioner

N Y S D E C

State Pollutant Discharge Elimination System (SPDES)

Industrial Chemical Survey

The Industrial Chemical Survey (ICS) was initially sent to many industries in a mass mailing in 1976 and 1977. The ICS form has since been made a part of the SPDES renewal application to obtain from all industries an update of information for use in preparation of your SPDES permit.

Attached is the Industrial Chemical Survey Form, including the list of Substances of Concern. You are asked to review the list carefully. Note that there are broad classes of compounds and that the list used in the original and subsequent mailings has been expanded to include metals. It should also be noted that virtually all water treatment chemicals and additives are substances of concern and should be reported on Part III, and indicated as a water treatment chemical under Purpose or Use.

If the information on your most recently submitted Survey adequately reflects the attached survey, alternatively you may complete the statement below and return this page with your SPDES application.

Note: The period for which information is requested is the past five years, not "since January 1, 1971" as stated on Part III, line 1 of the questionnaire.

We hereby state that our previous Industrial Chemical Survey, referenced below, adequately reflects current usage of the list of Substances of Concern received with this application., with updated information provided on page ICS-2.

Signature [Signature]

Date [Date]

Name John W. Blake, Ph.D.

Title Director, Environmental
Division

Date of Previous Surveys November 20, 1984 (NYSDEC/RTK Processing Unit)
and June 5, 1985 (NYSDEC, Region 3)

01-15-5(5/83)

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
ALBANY, NEW YORK 12233

INDUSTRIAL CHEMICAL SURVEY

PART I

Please refer to
attached table I

PLEASE COMPLETE AND RETURN TO THE ABOVE ADDRESS, ATTENTION: INDUSTRIAL CHEMICAL SURVEY.

COMPANY NAME New York Power Authority		SIC CODE (if known)	OFFICE USE ONLY
COMPANY MAILING ADDRESS 123 Main Street		CITY White Plains	STATE New York
PLANT NAME (if different) Indian Point Nuclear Unit 3		CONTACT NAME J. W. Blake, Ph. D.	TELEPHONE Area (914) 681-6385
PLANT ADDRESS (if different) Street Broadway and Bleakley Avenue		CITY Buchanan	STATE New York
PRINCIPAL BUSINESS OF PLANT Steam Electric Generating Station		ZIP CODE 10601	ZIP CODE 10511

NOTE: (If parent company, give name and addresses of all divisions, subsidiaries, etc., located in New York State. A separate questionnaire is to be completed and submitted for each.)

PART II
Discharge Information

WATER	1. Does your plant discharge liquid wastes to a municipally owned sanitary sewer system? Name of System _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2. Is your facility permitted to discharge liquid wastes under a State (SPDES) or Federal (NPDES) permit? Permit Number 0 0 0 4 4 7 2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	3. Do you discharge liquid wastes in any other manner? Explain _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If any of the above are "Yes": a. Do you discharge process or chemical wastes — (i.e. water used in manufacturing including direct contact cooling water and scrubber water)? b. Do you discharge non-contact cooling water? c. Do you discharge collected storm drainage only? d. Do you discharge sanitary wastes only?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
AIR	1. Does your facility have sources of possible emissions to the atmosphere?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	2. Enter Location and Facility Code as shown on your Air Pollution Control Application for Permits and Certification (If applicable)	
SOLID & CONCENTRATED LIQUID WASTES	1. List Name and Address of Firm (Including yourself) removing wastes other than office and cafeteria refuse. Name _____ Address _____ City _____ State _____ Zip Code _____ Name _____ Address _____ City _____ State _____ Zip Code _____ See attached page, ICS-1.	Active <input type="checkbox"/> Inactive <input type="checkbox"/>
	2. List Location(s) of Landfill(s) owned and used by your facility. 1 _____ 2 _____	<input type="checkbox"/> <input type="checkbox"/>
PESTICIDES	1. Does this facility: Manufacture Pesticides or Pesticide Product Ingredients? Produce Pesticides or Pesticide Product Ingredients? Formulate Pesticides? Repackage Pesticides?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2. EPA Establishment Number _____	

PART III.

Complete all information for those substances your facility has used, produced, stored, distributed or otherwise disposed of since January 1, 1971. Do not include chemicals used only in analytical laboratory work. Enter the name and code from Table I. If facility uses a substance in any of the Classes A - F which is not specified in the list, enter it as code class plus 99, e.g. 899 with name, usage, etc.

[illegible]

if you use chemicals of unknown composition, list trade name or other identification, name of supplier and complete information.

[illegible]

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

SIGNATURE (Owner, Partner, or Officer)

DATE _____

NAME (Printed or Typed) _____

John W. Blake

TITLE

Director, Environmental Division

INDUSTRIAL CHEMICAL SURVEY (PART II)/SUPPLEMENTAL
FORM (ITEM 5)

SCA Chemical Services
107 Albert Avenue
Newark, New Jersey 07105

Rollins Environmental Services
P. O. Box 337
Bridgeport, New Jersey 08014

Cortlandt Tank Service
22 Albany Post Road
Montrose, New York 10548

NAME OF SUBSTANCE	USAGE, 1984	AMOUNT ON HAND
Alum (Aluminum sulfate) (1)	-0-	300 lbs.
Ammonium hydroxide (30%)	1,125 lbs.	750 lbs.
Boric acid	76,050 lbs.	50,375 lbs.
Cyclohexylamine	-0-	-0-
Disodium phosphate	200 lbs.	600 lbs.
Drewgard 100 (2)	920 lbs.	1,380 lbs.
Hydrazine (35%)	21,150 lbs.	14,850 lbs.
Laundry detergent	-0-	-0-
Lithium hydroxide	22 lbs.	50 lbs.
Potassium chromate	66 lbs.	39.6 lbs.
Potassium dichromate	2.2 lbs.	5.5 lbs.
Potassium hydroxide	1 gal.	4 gals.
Sodium carbonate	4,600 lbs.	500 lbs.
Sodium hydroxide (50%)	27,000 gals.	1,300 gals.
Sodium hypochlorite (15%)	600 gals.	350 gals.
Sodium sulfite	-0-	100 lbs.
Sulfuric acid	17,000 gals.	3,300 gals.
Trisodium phosphate	200 lbs.	100 lbs.

(1) 1985 Usage is 5,200 lbs.

(2) The following substance may be used in place of Drewgard 100:

Mogul WS-144	920 lbs.	1,380 lbs.
(phosphonate polymer molybdate)		