



Tennessee Valley Authority, Post Office Box 2000, Soddy-Daisy, Tennessee 37379-2000

January 13, 2000

State of Tennessee  
Department of Environment and Conservation  
Division of Water Pollution Control  
401 Church Street, 6th Floor Annex  
Nashville, Tennessee 37243-1534

Attention: Ms. Evelyn Haskin, Enforcement & Compliance

Dear Ms. Haskin:

TENNESSEE VALLEY AUTHORITY - DISCHARGE MONITORING REPORT HARD COPIES FOR  
SEQUOYAH NUCLEAR PLANT (SQN)

Please find enclosed the Fourth Quarter 1999 DMR for SQN.

Please contact me at (423) 843-6700 or Diedre Nida at (423) 843-7748 if you have any questions  
or comments.

Sincerely,

A handwritten signature in black ink, appearing to read 'Debra J. Bodine'.

Debra J. Bodine  
Environmental Supervisor  
Sequoyah Nuclear Plant

Enclosure

cc (Enclosure):

Chattanooga Environmental Assistance Center  
Division of Water Pollution Control  
State Office Building, Suite 550  
540 McCallie Avenue  
Chattanooga, Tennessee 37402-2013

U.S. Nuclear Regulatory Commission  
ATTN: Document Control Desk  
Washington, D.C. 20555

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

TN0026450	101 G
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

DIFFUSER DISCHARGE

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
99	12	01	99	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Debra J. Bodline

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 Z 0 0 INSTREAM MONITORING	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	15.8	(04)	0	31 / 31	MODELD
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.5 DAILY MX	DEG. C.		SEE PERMIT	CK REQ
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	27.9	(04)	0	31 / 31	MODELD
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT DAILY MX	DEG. C.		SEE PERMIT	CK REQ
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	7.7	*****	7.8	(12)	0	10 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	<2	2	(19)	0	05 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30 DAILY MX	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL & GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	<5	<5	(19)	0	05 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	15 DAILY MX	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	1601	(03)	*****	*****	*****	..	0	31 / 31	RCORDR
	PERMIT REQUIREMENT	*****	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTIN UOUS	RCORDR
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	<0.027	(19)	0	49 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.058 INST MAX	MG/L		WEEK DAYS	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani		423	843-6700	00	01	12
Site Vice President				AREA CODE	NUMBER	YEAR
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

No closed mode operation. The following injections occurred: 1. PCL-222(max. calc. conc. was 0.035mg/L--limit 0.100mg/L) 2. CL-363(max. calc. conc. was 0.01 mg/L--limit 0.100mg/L) 3. Cuprostat-PF(max. calc. conc. was 0.108mg/L--limit 0.400mg/L) 4. PCL-401(max. calc. conc. was 0.039mg/L--limit 0.100mg/L) CCW analyses results attached.

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

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 (INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

**TN0026450**  
 PERMIT NUMBER

**101 G**  
 DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

DIFFUSER DISCHARGE

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

ATTN: Debra J. Bodline

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
From 99	12	01	To 99	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE - C, RATE OF CHANGE 82234 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	1.6	(04)	0	31 / 31	CALCTD
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	2.0	DEG. C.			CALCTD
DELTA TEMPERATURE - C 00016 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	3.2	(04)	0	31 / 31	CALCTD
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	5.0	DEG. C.			CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
BORON, TOTAL 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	<0.2	<0.2	<0.2	(19)	0	01 / 31	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	REPORT	REPORT	REPORT	MG/L			GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	 Environmental Supervisor	TELEPHONE		DATE		
Masoud Bagestani			423	843-6700	00	01	12
Site Vice President			AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT						

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

## Fourth Quarter 1999

### CCW Channel Results

Date	Diesel Range Organic (mg/L)	Total Water Hydrocarbons (mg/L)	Comments
10/06/99	< 0.1	< 1	
10/13/99	< 0.1	< 1	
10/20/99	< 0.1	< 1	
10/27/99	< 0.1	< 1	
11/03/99	< 0.1	< 1	
11/10/99	< 0.1	< 1	
11/17/99	< 0.1	< 1	
11/24/99	< 0.1	< 1	
12/01/99	< 0.1	< 1	
12/08/99	< 0.1	< 1	
12/15/99	< 0.1	< 1	
12/22/99	< 0.1	< 1	
12/29/99	< 0.1	< 1	

### Trench Discharge Effluent Results

Date	Diesel Range Organic (mg/L)	Total Water Hydrocarbons (mg/L)	Comments
10/06/99	1.0	< 1	
10/13/99	1.0	< 1	
10/20/99	0.6	< 1	
10/27/99	0.9	< 1	
11/03/99	0.3	< 1	
11/10/99	0.4	< 1	
11/17/99	0.3	< 1	
11/24/99	1.2	< 1	
12/01/99	0.4	< 1	
12/08/99	0.8	< 1	
12/15/99	1.1	< 1	
12/22/99	< 0.1	< 1	
12/29/99	2.0	1	

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

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 (INTEROFFICE SB-2A)  
**SODDY - DAISY TN 37384**  
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**  
 Location **HAMILTON COUNTY**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
**DISCHARGE MONITORING REPORT (DMR)**  
 (2-16) (17-19)

**TN0026450** **103 G**  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR  
 (SUBR 01)

F - FINAL  
 LOW VOL. WASTE TREATMENT POND  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

MONITORING PERIOD  
 From **99 12 01** To **99 12 31**  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
<b>PH</b>	<b>SAMPLE MEASUREMENT</b>	*****	*****	**	7.0	*****	8.4	(12)	0	16 / 31	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	<b>PERMIT REQUIREMENT</b>	*****	*****	**	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/ WEEK	GRAB
<b>SOLIDS, TOTAL SUSPENDED</b>	<b>SAMPLE MEASUREMENT</b>	<68	122	(26)	*****	<6	11	(19)	0	07 / 31	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	<b>PERMIT REQUIREMENT</b>	380 MO AVG	1250 DAILY MX	LBS/DY	*****	30 MO AVG	100 DAILY MX	MG/L		WEEKLY	GRAB
<b>OIL &amp; GREASE FREON EXTR-GRV METH</b>	<b>SAMPLE MEASUREMENT</b>	<60	<87	(26)	*****	<5	<5	(19)	0	07 / 31	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	<b>PERMIT REQUIREMENT</b>	190 MO AVG	250 DAILY MX	LBS/DY	*****	15 MO AVG	20 DAILY MX	MG/L		WEEKLY	GRAB
<b>FLOW, IN CONDUIT OR THRU TREATMENT PLANT</b>	<b>SAMPLE MEASUREMENT</b>	1.175	2.080	(03)	*****	*****	*****	..	0	31 / 31	TOTAL
50050 1 0 0 EFFLUENT GROSS VALUE	<b>PERMIT REQUIREMENT</b>	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	**		DAILY	TOTAL
	<b>SAMPLE MEASUREMENT</b>										
	<b>PERMIT REQUIREMENT</b>										
	<b>SAMPLE MEASUREMENT</b>										
	<b>PERMIT REQUIREMENT</b>										
	<b>SAMPLE MEASUREMENT</b>										
	<b>PERMIT REQUIREMENT</b>										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  Masoud Bagestani  Site Vice President  TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	 Environmental Supervisor	TELEPHONE		DATE		
			423	843-6700	00	01	12
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 Turbine Building Sump was aligned to the Yard Drainage Pond from 0147 on 12/16/1999 to 1645 on 12/17/1999.

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **BOX 2000**  
 (INTEROFFICE SB-2A)  
**SODDY - DAISY TN 37384**  
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**  
 Location **HAMILTON COUNTY**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

**TN0026450** **107 G**  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 01)  
 F - FINAL  
 METAL CLEANING WASTE POND  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

MONITORING PERIOD  
 From **99 12 01** To **99 12 31**  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Debra J. Bodine

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	**		*****				
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	<b>6.0</b> MINIMUM	*****	<b>9.0</b> MAXIMUM	SU	DAILY	GRAB
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)		
00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>1.0</b> DAILY MX	MG/L	DAILY	COMP-8
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)		
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>30</b> DAILY MX	MG/L	DAILY	COMP-8
OIL & GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)		
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>15</b> DAILY MX	MG/L	DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)		
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>1.0</b> DAILY MX	MG/L	DAILY	COMP-8
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)		
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>1.0</b> DAILY MX	MG/L	DAILY	COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	*****	*****	*****	**		
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****	DAILY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	 Environmental Supervisor	TELEPHONE		DATE		
Masoud Bagestani Site Vice President			423	843-6700	00	01	12
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 No phosphate bearing chemicals were employed. There were no releases during December 1999.

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

**TN0026450** **110 G**  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

RECYCLED COOLING WATER

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

ATTN: Debra J. Bodline

MONITORING PERIOD  
 From **99 12 01** To **99 12 31**  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	3 Card Only QUANTITY OR LOADING (46-53) (54-61)			4 Card Only QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(04)			
00010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	38.3 DAILY MX	DEG. C.	DAILY	GRAB-4	
PH	SAMPLE MEASUREMENT	*****	*****	**		*****		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	WEEKLY	GRAB	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.10 DAILY MX	MG/L	WEEKLY	GRAB-4	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani		423 843-6700	00	01	12	
Site Vice President						
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

*Debra J. Bodline*  
 Environmental Supervisor  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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

No Discharge this Period

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
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 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

TN0026450 112 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 01)  
 F - FINAL  
 SEWAGE TREATMENT PLANT  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

ATTN: Debra J. Bodine

MONITORING PERIOD  
 From YEAR 99 MO 12 DAY 01 To YEAR 99 MO 12 DAY 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	3 Card Only QUANTITY OR LOADING (46-53) (54-61)			4 Card Only QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0	EFFLUENT GROSS VALUE	*****	*****	**	*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	30 MO AVG	45 DAILY MX	MG/L		TWICE/MONTH GRAB	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	EFFLUENT GROSS VALUE	*****	*****	**	*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	30 MO AVG	45 DAILY MX	MG/L		TWICE/MONTH GRAB	
SOLIDS, SETTLEABLE 00545 1 0 0	EFFLUENT GROSS VALUE	*****	*****	**	*****	*****		(25)			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0 DAILY MX	MG/L		TWICE/WEEK GRAB	
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 1 0 0	EFFLUENT GROSS VALUE	*****	*****	**	*****			(13)			
	PERMIT REQUIREMENT	*****	*****	**	*****	200 ARI MEAN	1000 DAILY MX	#/100 ML		TWICE/MONTH GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	EFFLUENT GROSS VALUE			(03)	*****	*****	*****	**			
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTINUOUS TOTALZ	
CHLORINE, TOTAL RESIDUAL 50060 1 0 0	EFFLUENT GROSS VALUE	*****	*****	**	*****	*****		(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	2.0 INST MAX	MG/L		WEEK-DAYS GRAB	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		423	843-6700	00	01	12
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

*Debra J. Bodine*  
 Environmental Supervisor

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 Sewage flow has been diverted from this system since January, 1998. DSN-112 is now in stand-by status. No Discharge this Period

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **BOX 2000**  
 (INTEROFFICE SB-2A)  
**SODDY - DAISY TN 37384**  
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**  
 Location **HAMILTON COUNTY**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

**TN0026450** **118 G**  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR  
 (SUBR 01)  
 F - FINAL

WASTEWATER & STORM WATER  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

MONITORING PERIOD  
 From **99 12 01** To **99 12 31**  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Debra J. Bodine

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
<b>OXYGEN, DISSOLVED (DO)</b>	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	<b>2.0 DAILY MN</b>	*****	*****	MG/L		TWICE/WEEK	GRAB
<b>SOLIDS, TOTAL SUSPENDED</b>	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>100 DAILY MX</b>	MG/L		TWICE/WEEK	GRAB
<b>SOLIDS, SETTLEABLE</b>	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(25)			
00545 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>1.0 DAILY MX</b>	MG/L		ONCE/MONTH	GRAB
<b>FLOW, IN CONDUIT OR THRU TREATMENT PLANT</b>	SAMPLE MEASUREMENT			(03)	*****	*****	*****	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	<b>REPORT MO AVG</b>	<b>REPORT DAILY MX</b>	MGD	*****	*****	*****	*		ONCE/BATCH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	 Environmental Supervisor		TELEPHONE		DATE		
Masoud Bagestani Site Vice President				423	843-6700	00	01	12
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall. No Discharge this Period

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
 (INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

TN0026450 101 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 01)  
 F - FINAL  
 DIFFUSER DISCHARGE  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

MONITORING PERIOD  
 From 99 11 01 To 99 11 30  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Stephanie Howard

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 Z 0 0 INSTREAM MONITORING	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	21.1	(04)	0	30 / 30	MODEL
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.5 DAILY MX	DEG. C.		SEE PERMIT	CK REQ
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	32.7	(04)	0	30 / 30	MODEL
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT DAILY MX	DEG. C.		SEE PERMIT	CK REQ
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	7.6	*****	7.8	(12)	0	08 / 30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	<4	9	(19)	0	04 / 30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30 DAILY MX	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL & GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	<5	<5	(19)	0	04 / 30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	15 DAILY MX	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	1628	(03)	*****	*****	*****	..	0	30 / 30	RCORDR
	PERMIT REQUIREMENT	*****	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTINUOUS	RCORDR
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	0.037	(19)	0	51 / 30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.058 INST MAX	MG/L		WEEK-DAYS	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		423 843-6713		99	12	09
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO

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

No closed mode operation. The following injections occurred: 1. PCL-222(max. calc. conc. was 0.069mg/L--limit 0.100mg/L) 2. CL-363(max. calc. conc. was 0.01mg/L--limit 0.100mg/L) 3. Cuprostat-PF(max. calc. conc. was 0.11mg/L--limit 0.400mg/L) 4. PCL-401(max. calc. conc. was 0.04mg/L--limit 0.100mg/L)

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

TN0026450  
 PERMIT NUMBER

101 G  
 DISCHARGE NUMBER

MAJOR (SUBR 01)  
 F - FINAL  
 DIFFUSER DISCHARGE  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

MONITORING PERIOD

From 

YEAR	MO	DAY
99	11	01

 To 

YEAR	MO	DAY
99	11	30

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Stephanie Howard

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TEMPERATURE - C, RATE OF CHANGE 82234 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	1.6	(04)	0	30 / 30	CALCTD
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	2.0	DEG. C.			CALCTD
DELTA TEMPERATURE - C 00016 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	2.9	(04)	0	30 / 30	CALCTD
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	5.0	DEG. C.			CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
BORON, TOTAL 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	<0.2	<0.2	<0.2	(19)	0	01 / 30	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	REPORT	REPORT	REPORT	MG/L			GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		<i>Stephanie A. Howard</i> Acting Environmental Supervisor	423	843-6713	99	12
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

TN0026450	103 G
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

LOW VOL. WASTE TREATMENT POND

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
From 99	11	01	To 99	11	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Stephanie Howard

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	**	7.0	*****	8.4	(12)	0	12 / 30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	112	126	(26)	*****	9	11	(19)	0	04 / 30	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	380 MO AVG	1250 DAILY MX	LBS/DY	*****	30 MO AVG	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL & GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	<61	<67	(26)	*****	<5	<5	(19)	0	04 / 30	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	190 MO AVG	250 DAILY MX	LBS/DY	*****	15 MO AVG	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1.103	1.867	(03)	*****	*****	*****	**	0	30 / 30	TOTAL
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	**		DAILY	TOTAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		423 843-6713	99	12	09	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-18) (17-19)

TN0026450 107 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR  
 (SUBR 01)  
 F - FINAL

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

METAL CLEANING WASTE POND  
 EFFLUENT

MONITORING PERIOD  
 From 

YEAR	MO	DAY
99	11	01

 To 

YEAR	MO	DAY
99	11	30

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

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Stephanie Howard

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	**		*****				
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM		DAILY	GRAB
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****				
00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX		DAILY	COMP-B
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****				
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	30 DAILY MX		DAILY	COMP-B
OIL & GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****	**	*****	*****				
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	15 DAILY MX		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****				
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX		DAILY	COMP-B
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****				
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX		DAILY	COMP-B
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	*****	*****	*****	**		
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***	DAILY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani		423 843-6713		99	12	09
Site Vice President		AREA CODE NUMBER		YEAR	MO	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 There were no releases during November 1999. No phosphate bearing chemicals were employed.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location If Different)

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
 (INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-18)

(17-19)

**TN0026450**  
 PERMIT NUMBER

**110 G**  
 DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

RECYCLED COOLING WATER

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

From 

YEAR	MO	DAY
99	11	01

 To 

YEAR	MO	DAY
99	11	30

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Stephanie Howard

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only (46-53) / (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) / (46-53) / (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	38.3 DAILY MX	(04) DEG. C.		DAILY	GRAB-4
PH 00400 1 0 0	SAMPLE MEASUREMENT	*****	*****	**		*****		(12)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.10 DAILY MX	MG/L		WEEKLY	GRAB-4
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		423 843-6713	99	12	09	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

No Discharge this Period.

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **BOX 2000**  
 (INTEROFFICE SB-2A)  
**SODDY - DAISY TN 37384**  
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**  
 Location **HAMILTON COUNTY**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

**DISCHARGE MONITORING REPORT (DMR)**

(2-16) (17-19)

<b>TN0026450</b>	<b>112 G</b>
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

SEWAGE TREATMENT PLANT

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

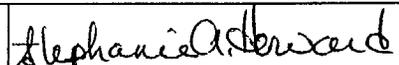
ATTN: Stephanie Howard

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
From <b>99</b>	<b>11</b>	<b>01</b>	To <b>99</b>	<b>11</b>	<b>30</b>
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
<b>BOD, 5-DAY (20 DEG. C)</b> 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****			(19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	<b>30 MO AVG</b>	<b>45 DAILY MX</b>	MG/L	TWICE/MONTH	GRAB
<b>SOLIDS, TOTAL SUSPENDED</b> 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****			(19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	<b>30 MO AVG</b>	<b>45 DAILY MX</b>	MG/L	TWICE/MONTH	GRAB
<b>SOLIDS, SETTLEABLE</b> 00545 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(25)		
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>1.0 DAILY MX</b>	MG/L	TWICE/WEEK	GRAB
<b>COLIFORM, FECAL MF, M-FC BROTH, 44.5C</b> 31616 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****			(13)		
	PERMIT REQUIREMENT	*****	*****	**	*****	<b>200 ARI MEAN</b>	<b>1000 DAILY MX</b>	#/100 ML	TWICE/MONTH	GRAB
<b>FLOW, IN CONDUIT OR THRU TREATMENT PLANT</b> 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	*****	*****	*****	**		
	PERMIT REQUIREMENT	<b>REPORT MO AVG</b>	<b>REPORT DAILY MX</b>	MGD	*****	*****	*****	****	CONTINUOUS	TOTALZ
<b>CHLORINE, TOTAL RESIDUAL</b> 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>2.0 INST MAX</b>	MG/L	WEEK-DAYS	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE			
Masoud Bagestani Site Vice President		 Acting Environmental Supervisor SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	423	843-6713	99	12	09
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 Sewage flow has been diverted from this system since January, 1998. DSN-112 is now in stand-by status. No Discharge this Period

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
 Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
**DISCHARGE MONITORING REPORT (DMR)**  
 (2-16) (17-19)

MAJOR  
 (SUBR 01)  
 F - FINAL  
 WASTEWATER & STORM WATER  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

**TN0026450**  
 PERMIT NUMBER

**118 G**  
 DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
From 99	11	01	To 99	11	30
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Stephanie Howard

PARAMETER (32-37)	SAMPLE MEASUREMENT	3 Card Only QUANTITY OR LOADING (46-53) (54-61)			4 Card Only QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
<b>OXYGEN, DISSOLVED (DO)</b>	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	2.0 DAILY MN	*****	*****	MG/L	TWICE/ WEEK	GRAB	
<b>SOLIDS, TOTAL SUSPENDED</b>	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	100 DAILY MX	MG/L	TWICE/ WEEK	GRAB	
<b>SOLIDS, SETTLEABLE</b>	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(25)			
00545 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0 DAILY MX	MG/L	ONCE/ MONTH	GRAB	
<b>FLOW, IN CONDUIT OR THRU TREATMENT PLANT</b>	SAMPLE MEASUREMENT			(03)	*****	*****	*****	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	*	ONCE/ BATCH	CALCTD	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE				
Masoud Bagestani		Acting Environmental Supervisor		23	843-6713	99	12	09
Site Vice President		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED								

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

During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall. No Discharge this Period

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

TN0026450 101 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 01)  
 F - FINAL  
 DIFFUSER DISCHARGE  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

MONITORING PERIOD  
 From 99 10 01 To 99 10 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Stephanie A. Howard

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 Z 0 0 INSTREAM MONITORING	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	25.3	(04)	0	31 / 31	MODEL
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.5 DAILY MX	DEG. C.		SEE PERMIT	CK REQ
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	37.1	(04)	0	31 / 31	MODEL
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT DAILY MX	DEG. C.		SEE PERMIT	CK REQ
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	7.7	*****	7.8	(12)	0	08 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	<3	4	(19)	0	04 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30 DAILY MX	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL & GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	<5	<5	(19)	0	04 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	15 DAILY MX	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	1649	(03)	*****	*****	*****	..	0	31 / 31	RCORDR
	PERMIT REQUIREMENT	*****	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTINUOUS	RCORDR
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	0.030	(19)	0	50 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.058 INST MAX	MG/L		WEEK-DAYS	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani		423 843-6713		00	01	13
Site Vice President		AREA CODE NUMBER		YEAR	MO	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

No closed mode operation. The following injections occurred: 1. PCL-222(max. calc. conc. was 0.07mg/L--limit 0.100mg/L) 2. CL-363(max. calc. conc. was 0.011mg/L--limit 0.100 mg/L) 3. Cuprostat-PF(max. calc. conc. was 0.109mg/L--limit 0.400mg/L) 4. H-130M(max. calc. conc. was 0.029mg/L--limit 0.05mg/L).

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

TN0026450	101 G
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

DIFFUSER DISCHARGE

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

From	YEAR	MO	DAY	To	YEAR	MO	DAY
	99	10	01		99	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61) UNITS)			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61) UNITS)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE - C, RATE OF CHANGE 82234 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	1.6	(04)	0	31 / 31	CALCTD
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	2.0	DEG. C.			CALCTD
DELTA TEMPERATURE - C 00016 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	2.7	(04)	0	31 / 31	CALCTD
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	3.0	DEG. C.			CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
BORON, TOTAL 01022 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	<0.2	<0.2	<0.2	(19)	0	01 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	REPORT	REPORT	REPORT	MG/L			GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE			
Masoud Bagestani		Acting Environmental Supervisor	423	843-6713	00	01	13
Site Vice President			AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT						

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

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
 (INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

TN0026450 103 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

LOW VOL. WASTE TREATMENT POND

EFFLUENT

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

ATTN: Stephanie A. Howard

MONITORING PERIOD  
 From YEAR 99 MO 10 DAY 01 To YEAR 99 MO 10 DAY 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	**	7.0	*****	8.7	(12)	0	11 / 31	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	115	198	(26)	*****	12	12	(19)	0	04 / 31	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	380 MO AVG	1250 DAILY MX	LBS/DY	*****	30 MO AVG	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL & GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	<50	<83	(26)	*****	<5	<5	(19)	0	04 / 31	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	190 MO AVG	250 DAILY MX	LBS/DY	*****	15 MO AVG	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1.052	1.982	(03)	*****	*****	*****	**	0	31 / 31	TOTAL
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	**		DAILY	TOTAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		423 843-6713		00	01	13
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO

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

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY IN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

TN0026450 107 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

METAL CLEANING WASTE POND

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

ATTN: Stephanie A. Howard

MONITORING PERIOD  
 From 99 10 01 To 99 10 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	3 Card Only (46-53) QUANTITY OR LOADING (54-61)			4 Card Only (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	**		*****		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0 DAILY MX	MG/L		DAILY	COMP-8
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30 DAILY MX	MG/L		DAILY	COMP-8
OIL & GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	15 DAILY MX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0 DAILY MX	MG/L		DAILY	COMP-8
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0 DAILY MX	MG/L		DAILY	COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	*****	*****	*****	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		423 843-6713		00	01	13
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 There were no releases during October 1999. No phosphate bearing chemicals were employed.

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
 (INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

TN0026450 110 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

RECYCLED COOLING WATER

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

From **99 10 01** To **99 10 31**  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	3 Card Only QUANTITY OR LOADING (46-53) (54-61)			4 Card Only QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(04)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	38.3 DAILY MX	DEG. C.	DAILY	GRAB-4	
PH 00400 1 0 0	SAMPLE MEASUREMENT	*****	*****	**		*****		(12)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	WEEKLY	GRAB	
CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.10 DAILY MX	MG/L	WEEKLY	GRAB-4	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		423 843-6713	00	01	13	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 No flow.

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
(INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-19) (17-19)

TN0026450	112 G
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

SEWAGE TREATMENT PLANT

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

ATTN: Stephanie A. Howard

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
From 99	10	01	To 99	10	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	3 Card Only QUANTITY OR LOADING (46-53) (54-61)			4 Card Only QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	**	*****						
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 MO AVG	45 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****						
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 MO AVG	45 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****					
00545 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0 DAILY MX	MG/L		TWICE/WEEK	GRAB
COLIFORM, FECAL MF, M-FC BROTH, 44.5C	SAMPLE MEASUREMENT	*****	*****	**	*****						
31616 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	*****	200 ARI MEAN	1000 DAILY MX	#/100 ML		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	*****	*****	*****	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTINUOUS	TOTALZ
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****	*****					
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	2.0 INST MAX	MG/L		WEEK-DAYS	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		423 843-6713	00	01	13	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 Sewage flow has been diverted from this system since January 1998. DSN-112 is now in stand-by status.

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

Name TVA - SEQUOYAH NUCLEAR PLANT  
 Address BOX 2000  
 (INTEROFFICE SB-2A)  
SODDY - DAISY TN 37384  
 Facility TVA - SEQUOYAH NUCLEAR PLANT  
 Location HAMILTON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

**TN0026450** **118 G**  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

WASTEWATER & STORM WATER

EFFLUENT

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

ATTN: Stephanie A. Howard

MONITORING PERIOD  
 From **99 10 01** To **99 10 31**  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	3 Card Only (46-53) QUANTITY OR LOADING (54-61)			4 Card Only (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
<b>OXYGEN, DISSOLVED (DO)</b> 00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	(19)			
	PERMIT REQUIREMENT	*****	*****	****	<b>2.0</b> DAILY MN	*****	*****	MG/L		TWICE/ WEEK	GRAB
<b>SOLIDS, TOTAL SUSPENDED</b> 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>100</b> DAILY MX	MG/L		TWICE/ WEEK	GRAB
<b>SOLIDS, SETTLEABLE</b> 00545 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		(25)			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	<b>1.0</b> DAILY MX	MG/L		ONCE/ MONTH	GRAB
<b>FLOW, IN CONDUIT OR THRU TREATMENT PLANT</b> 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	*****	*****	*****	**			
	PERMIT REQUIREMENT	<b>REPORT MO AVG</b>	<b>REPORT DAILY MX</b>	MGD	*****	*****	*****	*		ONCE/ BATCH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
Masoud Bagestani Site Vice President		423	843-6713	00	01	13
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

*Stephanie A. Howard*  
 Acting Environmental Supervisor

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall.