

50-327/328



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

April 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, Compliance Review

TENNESSEE VALLEY AUTHORITY - SEQUOYAH NUCLEAR PLANT (SQN), NPDES PERMIT
TN0026450, DISCHARGE MONITORING REPORT AMENDMENT

In a recent self assessment of Environmental data, it was found that the copolymer discharge for the raw water treatment chemical PCL-222 was not being added to the copolymer discharge of PCL-401. The total copolymer discharge concentration was recalculated for November through the present.

All releases of total copolymer were well below the NPDES discharge limit for copolymer of <0.100 mg/L. Corrected 4th Quarter 1999 copolymer concentrations are shown in the enclosed amended DMR reports. First quarter results are correct as reported in the quarterly DMR submitted on 4/13/00.

If you have any questions, please contact Diedre Nida of my staff at (423) 843-7748.

Sincerely,

for Debra 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

JE25

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 **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

ATTN: Debra J. Bodine

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.

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
TEMPERATURE, WATER DEG. CENTIGRADE 00010 Z 0 0 INSTREAM MONITORING	PERMIT REQUIREMENT	*****	*****	**	*****	*****	21.1	(04)	0	30 / 30	MODEL D
		*****	*****	****	*****	*****	30.5 DAILY MX	DEG. C.		SEE PERMIT	CK REQ
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	*****	*****	32.7	(04)	0	30 / 30	MODEL D
		*****	*****	****	*****	*****	REPORT DAILY MX	DEG. C.		SEE PERMIT	CK REQ
PH 00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	7.6	*****	7.8	(12)	0	08 / 30	GRAB
		*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	*****	<4	9	(19)	0	04 / 30	GRAB
		*****	*****	****	*****	30 DAILY MX	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL & GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	*****	<5	<5	(19)	0	04 / 30	GRAB
		*****	*****	****	*****	15 DAILY MX	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	1628	(03)	*****	*****	*****	..	0	30 / 30	RCOR DR
		*****	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTIN UOUS	RCOR DR
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	*****	*****	0.037	(19)	0	51 / 30	GRAB
		*****	*****	****	*****	*****	0.058 INST MAX	MG/L		WEEK- DAYS	CALCTD

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.)	<i>Debra J. Bodine</i> Environmental Supervisor SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 423 843-6700 AREA CODE NUMBER	DATE 00 04 10 YEAR MO DAY
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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 0.050mg/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**

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DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

TN0026450 **101 G**
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MAJOR

(SUBR 01)

F - FINAL

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		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	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	*****	*****	**	*****	*****	27.9	(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	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	*****	*****	*****	****		CONTINUOUS	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 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 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE 423 843-6700 AREA CODE NUMBER		DATE 00 04 10 YEAR MO DAY	

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