

November 21, 2001 L-01-143

Document Control Desk U.S. Nuclear Regulatory Commission Washington, DC 20555

NPDES Monthly Report, EPA Permit No. PA0025615

SUBJECT:

Beaver Valley Power Station, Unit No. 1 and No. 2

BV-1 Docket No. 50-334, License No. DPR-66 BV-2 Docket No. 50-412, License No. NPF-73

Dear Sir:

Enclosed is a copy of the NPDES Monthly Report as submitted to the Pennsylvania Department of Environmental Protection.

Sincerely,

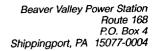
Bill Pearce

Plant General Manager

BHF/lar

C: J. W. Venzon Tiffany Shepard Central File

IE25





November 21, 2001 NPD3VPO:1202

Attention: "DMR Clerk"
Department of Environmental Protection
Bureau of Water Quality Management
400 Waterfront Drive
Pittsburgh, PA 15222

NPDES Permit PA0025615, Notice of Non-Compliance

Dear Sir or Madam:

During the month of October, Outfall 303 (Unit 1 Oil/Water Separator) exceeded the monthly maximum pH limit of 9.0 S.U. The maximum pH for the month was 9.15 S.U.

In order to prevent damage to the Unit 1 Steam Generators it is necessary to operate the steam generators with trace amounts of impurities. Auxiliary steam used for heating plant components contained higher than normal amounts of impurities. Auxiliary steam is normally returned to the condensate system. However due to the impurity level in the auxiliary steam, the auxiliary steam was not returned to the condenser, instead directed to a turbine plant floor drain which flows to Outfall 303. Auxiliary steam contains chemical treatment which maintains a pH greater than 9.0 in the condensate system, therefore pH at Outfall 303 increased above permit limitations.

As soon as it was identified that the pH of Outfall 303 exceeded permit limitations, auxiliary steam discharge to the outfall was terminated. No pollutants that may cause or contribute to an impact on aquatic life, or pose a substantial hazard to human health or the environment due to its quantity or concentration were released to the environment.

If you have any questions contact Joseph W. Venzon, Chemistry and Environmental Manager at (724) 682-5113.

Sincerely.

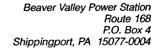
Bill Pearce

Plant General Manager

DJS/lar

C:

J.W. Venzon Tiffany Shepard Central File





November 21, 2001 NPD3VPO:1203

Attention: "DMR Clerk"
Department of Environmental Protection
Bureau of Water Quality Management
400 Waterfront Drive
Pittsburgh, PA 15222

NPDES Permit PA0025615, Quarterly Sampling at Outfall 013

Dear Sir or Madam:

As indicated in the September 2001 DMR submittal it was noted that samples for Cyanide, Free and Total and Antimony were broken during shipment. Therefore only one sample for the quarter was obtained. A sample was collected in October to meet the twice per quarter monitoring requirement for the 3rd quarter.

Results are as follows:

Cyanide, Free

<0.02 mg/L

Cyanide, Total

<0.02 mg/L

Antimony, Total

0.006 mg/L

If you have any questions contact Joseph W. Venzon, Chemistry and Environmental Manager at (724) 682-5113.

Sincerely,

Bill Pearce

Plant General Manager

DJS/lar

C:

J.W. Venzon Tiffany Shepard Central File

Instruction		and sub		ITORING REPORT SE		. SEWAGE SLUDGE	REPORT	Month: Year:	000Ber 2001
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disposa	l site se	ction and	provide their	r names and indiv	idual drv			. \	
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4. If no s	ludge was	removed,	note on form.	•					
			SLUDGE PRO	DUCTION INFORMAT	ION (prior	to incinerati	on)		
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Other (spe					 				
Country		<u> </u>				ļ			ļ

Beaver

Shewiles

11/28/01.

(724) 682-5113

_ Chemistry Manager

County:

Beaver

				DISCHARGE MONIT	ORING REPORT S	SUPPLEMENTAL	SEWAGE SLUDGE	REPORT	Month: (Con BEL .
	truction			:		•			Year:	2001
1.	Complete	e monthly	and sub	mit with each DM	R. Attach addi	itional				
	sheets a	and comme	nts as n	eeded for comple	teness and cla	irity.	Perm	ittee: FEN	OC	
2.	Sludge (productio	n inform	ation will be us	ed to evaluate	e plant	Plant	: Beaver	Valley Power	Station
	perform	ance. Re	port only	y sludge which h	as been remove	ed from	NPDES	PA00256	15	
	digester	rs and ot	her soli	ds which have be	en permanently	/ removed	Munic	ipality:	Shippingport	Borough
				ss. Do not incl		m other	Count	y: Beaver		
				d at your facili						
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	dispose	of sludge	e from of	ther plants, inc	lude their ton	nage in the			-	
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4.	IT NO SI	udge was	removed,	, note on form.				_		
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Coun			Beaver		Beaver					

Beaver

Allen Day

Ilveloi

Chemistry Manager

(724) 682-5113

/CCD 1 2/21/011

" ME BEAVER VALLEY POWER STATION ADDRESSP. D. BUX 4

ATTN: DAVID DRMDDRF

FACILITY

PA 15077

PA0025615 PERMIT NUMBER

COLA DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL

Form Approved.

OMB No. 2040-0004

SHIPPINGPORT FACILITY	PA 15077	MONITO	RING PERIOD	ONITS 1%2 COOLG	TOWER BLWDN.
LOCATION	r	YEAR MO DAY	YEAR MO DAY	*** NO DISCHARG	E 444
ATTN: KEVIN OSTROWSKI	r:	FROM 01 10 01	то 01 10 31		before completing this form.
	QUANTITY	OR LOADING	QUANTITY OR	CONCENTRATION	NO EDECLIENCY SAMP

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

PARAMETER		QUAN	ITITY OR LOADING		G	QUANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
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Loseph W. Ven: Chemistry Manag	submitte or those submitte I am aw	e that qualified personnel ad. Based on my inquiry of persons directly responsi ad is, to the best of my kn are that there are significa	of the person or persons with the person or persons with the information owiedge and belief, true, in penalties for submitting	tho manage the mation, the infor accurate, and co false informatio	system, rmation omplete. SIGNA	TURE OF PRINCIPAL ICER OR AUTHORIZE		4, 682-		O/ /c	
COMMENTS AND EXPLANATION OF AN		g the possibility of fine and		ig violations.			l cop	E I MOMBE		TEAR IV	ט טאו

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

HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP, REPORT THE DAILY MAXIMUM FOR BETZ D T-1 WHEN DISCHARGING (24 HR. COMP.): MG/L. (THE LIMIT IS 35 MG/L AS A DAILY MAX.)

EPA Form 3320-1 (REV 3/99) Previous editions may be used. # Plant was not in wet lay up in Octoozz/010924HISISA4-PART FORM PAGE 1 OF

PERMIT, EE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME BEAVER VALLEY POWER STATION

ADDRESSP. O. BOX 4

ACILITY

OCATION.

ATTN; DAVID ORNDORF

SHIPPINGPORT

PA 15077

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

PA0025615 PERMIT NUMBER

002 A DISCHARGE NUMBER

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM [

Form Approved. OMB No. 2040-0004

MAJOR (SUBR 05) F - FINAL

INTAKE SCREEN BACKWASH

*** NO DISCHARGE | ***
NOTE: Read Instructions before completing this form.

THOUGH A PART FORM PAGE

TIN: KEVIN OSTROWS	. T		FROM [NOTÉ: Read Instru	uctions befor	e com	pleting this	form.
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 $\mathsf{PERM}_i^{r,j} \top \mathsf{TEE} \ \mathsf{NAME/ADDRESS} \ \textit{(Include Facility Name/Location if Different)}$ NAME SEAVER VALLEY FOWER STATION ADDRESSP G. BOX 4

ATTN; DAVID ORNDORF

SHIPPINGPORT

FACILITY LOCATION PA 15077

PERMIT NUMBER

FROM

A EGG DISCHARGE NUMBER

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

PA0025615

YEAR MO DAY

MAJOR -(SUBR 05) F - FINAL

Form Approved. OMB No. 2040-0004

003 UNCONTAMINATED STORM WATER MONITORING PERIOD YEAR MO DAY *** NO DISCHARGE | _ | *** 01 31

NOTE: Read Instructions before completing this form. ATTN: KEVIN OSTROWSKI QUANTITY OR CONCENTRATION NO. FREQUENCY SAMPLE QUANTITY OR LOADING TYPE OF PARAMETER **ANALYSIS** UNITS **AVERAGE** MAXIMUM UNITS MINIMUM **AVERAGE** MAXIMUM 本本本本本本 **** FLOW, IN COMPUTT OR 0(3) 经长经经验的 2/31SAMPLE Est 0.039 0.127 THRU TREATMENT PLANT MEASUREMENT REPORT 计本本 存在的事务 TWICE/ESTIMA REPORT 杂水水水水水 50050 1 0 0 长术长术 PERMIT HTMOM MO AVG DAILY MX *** EFFLUENT GROSS VALUE REQUIREMENT MGD 1 SAMPLE MEASUREMENT PERMIT REQUIREMENT TELEPHONE I Certify under penalty of law that this document and all attachments were DATE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Joseph W. Venzon Manager TYPED OR PRINTED COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

prepared under my direction or supervision in accordance with a system designed to assuire 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.

IVENZON SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

724,682-5113 20 01 10 AREA NUMBER YEAR MO

 ${\tt PERMI.TEE\ NAME/ADDRESS\ (Include\ Facility\ Name/Location\ if\ Different)}$ NAME BEAVER VALLEY POWER STATION ADDRESSP D. BOX 4

ATTN: DAVID ORMDORF

SHIPPINGPORT

FACILITY

ATTN: KEVIN OSTROWSKI

LOCATION

PA 15077

PACC25615 PERMIT NUMBER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR) 004 A DISCHARGE NUMBER

MAJOR

F - FINAL

Form Approved. OMB No. 2040-0004 (SUBR 05)

UNIT ONE COOLS TOWER OVERFLOW

MONITORING PERIOD YEAR MO DAY 01 10 31 YEAR MO DAY FROM UI TO OI

		QUAN	TITY OR LOADING	<u> </u>		QUANTITY OR CON	CENTRATION		NO. EX	FREQUENC OF	Y SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMÚM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
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CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	****		****	0,0	0.0	(19)	G	* 1/31	Grab
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NAME/TITLE PRINCIPAL EXECUTIVE O	prepar to assu	y under penalty of law that ed under my direction or si ure that qualified personnel ted. Based on my inquiry te persons directly respons	pervision in accordance properly gather and evaluations	with a system duate the informa	ation	rd Hoffmen	to -	TELEPHO			DATE
Chemistry Mana	submit	e persons directly respons ted is , to the best of my kr ware that there are significa ng the possibility of fine an	nowledge and belief, true, ant penalties for submitting	accurate, and c g false informati	complete. SIGN.	ATURE OF PRINCIPAL FICER OR AUTHORIZE		4 682. EA NUMBE		O YEAR	10 20 MO DAY
COMMENTS AND EXPLANATION OF A	NY VIOLATIONS (F	Reference all attachm	ents here)		desima	d for outage	e .	1			

* Flow only occurred in one week in Oct., Cooling tower drained for outage.

THIS IS A A-DART FORM PAGE

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP. O. BOX 4

ATTN: DAVID GRNDGRF

SHIPPINGPORT

PA 15077

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) PA0025615

006 A DISCHARGE NUMBER

Form Approved. OMB No. 2040-0004 MAJOR (SUBR 05)

PERMIT NUMBER F - FINAL MONITORING PERIOD YEAR MO DAY YEAR MO DAY 01 10 31 YEAR FROM

AUX. INTAKE SCREEN BACKWASH

*** NO DISCHARGE | ***
NOTE: Read Instructions before completing the

PARAMETER FLOW, IN CONDUIT OR THRU TREATMENT PLANTA	SAMPLE MEASUREMENT PERMIT	AVERAGE 0.002	MAXIMUM O.016	UNITS	MINIMUM	AVERAGE	r	UNITS	NO. EX	OF	SAMPLE TYPE
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	PERMIT		0.016	(03)	茶茶茶茶茶	***	****		0	1/7	Est.
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Joseph W. Venzor Chemistry Mana	euhmit	ted. Resed on my Inquity i	of the nerson or nersons w	the manage the	system.	-JUVENZOI	<u>)</u>	ממן ומים	E115		0 20
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COMMENTS AND EXPLANATION OF AN								,			

EPA Form 3320-1 (REV 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP. D. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

FACILITY LOCATION PA 15077

PERMIT NUMBER

FROM

PA0025615

MO DAY

OI

YEAR

007 A DISCHARGE NUMBER

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10

:31

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

MONITORING PERIOD

YEAR

01

MAJOR (SUBR 05) F - FINAL Form Approved. OMB No. 2040-0004

AUX. INTAKE SYSTEM

*** NO DISCHARGE | X | *** NOTE: Read Instructions before completing this form.

ATTN: KEVIN OSTROWSK	I		PHOM [54]		74 10 341		NOTE: Read Ins	structions befor	e com	pleting this t	form.
		QUAN	TITY OR LOADING	i		QUANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
F}+	SAMPLE - MEASUREMENT	****	****			***		(12)	-		
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50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT: REQUIREMENT	REPORT MD AVG	REPORT DAILY MX	MGD	*****	*****	*****	***	W	EEKLYE	STIMA
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	***	格格特格格格		***			(17)			
50060 1 0 0 Effluent gross value	PERMIT REQUIREMENT	****	* . *******	***	华林林林楼	0.5 MO AVE	1.25 INST MA	900 0 900 F	W	EEKLYG	RAB
CHEORINE, FMEE AVAILABLE	ŚAMPLĘ MEASUREMENT	****	****		***			(19)	201000000000000000000000000000000000000		
50064 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***		***	*****	0.2 AVERAGE	D. 5 MAXIMUM	MG/L	*	EEKLYG	in HD
	SAMPLE MEASUREMENT									1	
	PERMIT REQUIREMENT						•				
	SAMPLE MEASUREMENT								No. Const.		
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT							al de la companya de			
	PERMIT REQUIREMENT					711					
Joseph W. Venzon	propers	under penalty of law that d under my direction or so e that qualified personnel	pervision in accordance of properly gather and evaluation	with a system duate the informa	tion	wid of french	tor -	TELEPHON	<u> </u>	J DA	TE
Chemistry Manage	or those	ed. Based on my inquiry of persons directly responsed is , to the best of my knare that there are significate.	lble for gathering the infor	mation, the info	complete. SIGN	TVENZON IATURE OF PRINCIPAL		724,682-3	5//3		
TYPED OR PRINTED U	I am aw Includin	g the possibility of fine an	d imprisonment for knowle	ng violations.	OF	FICER OR AUTHORIZE	D AGENT	AREA NUMBE	R	YEAR M	O DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) MONITORING FOR FLOW, FREE AVAILABLE CHLORINE, AND TOTAL RESIDUAL CHLORINE ARE REGUIRED ONLY DURING THOSE PERIODS OF DISCHARGE FROM THE ALTERNATE FLOW PATH OF THE REACTOR PLANT RIVER WATER SYSTEM.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP. B. BOX 4

ATTN: DAVID (ORNDORF

SHIPPINGPORT FACILITY

LOCATION

PA 15077

PA0025615 PERMIT NUMBER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) 008 A DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL Form Approved. OMB No. 2040-0004

*** NO DISCHARGE | X | ***

NOTE: Read Instructions before completing this form.

UNIT 1 COOLING TOWER PUMPHOUSE

		ħ	MONITO	RING	PERIO)	
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	O1	10	O.I.	то	01	1.0	31

ATTN: KEVIN OSTROWSK	I		PROW		10 32	3.01 02	NOTE: Read Inst				form.
		QUAN	ITITY OR LOADING	ì	G	QUANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	1 -^	ANALYSIS	
PH	SAMPLE MEASUREMENT	****	***			****		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	******	*** ****	6.0 MINIMUM	*****	7.0 MAXIMUM	5U		WICE/G MONTH	RAB
SULIDS: TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	*****		***	1311313131313131313131313131313131313131		(19)	1000	3.3.3.46	
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OIL % GREASE	SAMPLE MEASUREMENT	******	****					(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	**************************************	*************************************	***	MO AVG	DAILY MX	30 INST MAX	MG/L	F10931803723	WICE/C MONTH	RAB
THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	****	****	***				
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	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OF	prepare	r under penalty of law that ed under my direction or su re that qualified personnel	upervision in accordance value or properly gather and evalue.	with a system do	tion I	vid Hoffmer	for	TELEPHON	E	- DA	TE
Joseph W. Venz Chemistry Mana	submit or thos submit	ed. Based on my inquiry of e persons directly respons ed is , to the best of my kn vare that there are significa	ible for gathering the infor-	mation the info	rmation	TURE OF PRINCIPAL	EXECUTIVE 7.	24 682-	5113	01 1	0 20
TYPED OR PRINTED	includir	ng the possibility of fine and	d imprisonment for knowlr	ng violations.	off. Off	ICER OR AUTHORIZE	D AGENT A	ODE NUMBER	3	YEAR M	O DAY
COMMENTS AND EXPLANATION OF AN	IY VIOLATIONS (F	eference all attachm	ents here)								

 ${\tt PERMITTEE\ NAME/ADDRESS\ (Include\ Facility\ Name/Location\ if\ Different)}$

BEAVER VALLEY POWER STATION ADDRESSP. B. BOX 4

ATTN; DAVID ORNDORF

SHIPPINGPORT

FACILITY LOCATION PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) PA0025615

MONITORING PERIOD

PERMIT NUMBER

MO DAY

010 A DISCHARGE NUMBER Form Approved. OMB No. 2040-0004

MAJOR (SUBR 05) F - FINAL

UNIT 2 COOLING WATER

*** NO DISCHARGE |__| ***

YEAR MO DAY FROM ATTN: KEVIN DSTROWSKI NOTE: Read Instructions before completing this form. QUANTITY OR LOADING QUANTITY OR CONCENTRATION SAMPLE NO. FREQUENCY TYPE PARAMETER OF ANALYSIS **AVERAGE AVERAGE** MAXIMUM UNITS MUMINIM MAXIMUM UNITS 本本本本本本 本本本本本本 **** 12) SAMPLE 117 8.50 MEASUREMENT 7.68 Grub 00400 1 0 0 **** 水亦木 化妆妆妆妆 7. O WEEKLYCRAB PERMIT. EFFLUENT GROSS VALUE REQUIREMENT 计计计计 MINIMUM MAXIMUM CLAMIROL CT-1, TOTAL 13/31 SAMPLE 东京本本本本 宏表示示意 不存在存在 100) comp 0.0 MEASUREMENT 0.0 WATER 24 04251 1 0 0 李林林林林林 WHEN COMP24 **** PERMIT 海海海海海 经基本条件 EFFLUENT GROSS VALUE REQUIREMENT 计字字字 INST MAX MG/L MD AVG DISCHR FLOW, IN CONDUIT OR (03) SAMPLE 本本本本本本 **** ***** 4,2 THRU TREATMENT PLANT MEASUREMENT meas 50050 1 0 Q REPORT REPORT ***** 本本本本本本 本本本章 水水水水香香 WEEKLYMEASHD DAILY MY EFFLUENT GROSS VALUE REQUIREMENT MO AVG MOD *** CHLURIME, TOTAL **** 计计计计计计 表表表表表表 19) SAMPLE 0.0 1/7 0.0 Grab RESIDUAL MEASUREMENT 50060 1 0 0 非体体体体体 **经帐款 经收款债券** PERMIT 本本本本本本 . 25 WEEKLYGRAB EFFLUENT GROSS VALUE REQUIREMENT 化杂杂杂 MO AVG INST MAX MG/L CHLORINE, FREE 本本本本本本 杂字字字字 水水水水水 19) SAMPLE 0.0 0.0 Grab AVAILABLE MEASUREMENT 50064 1 0 0 **** 法本政府 非有存款者 ******* 3. 2 0.5 WEEKLYGRAB PERMIT EFFLUENT GROSS VALUE REQUIREMENT AVERAGE MUMIXAM MG/L SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Joseph W. Venzon Chemistry Manager TYPED OR PRINTED

P/E AS A DAILY MAX:)

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, submitted. Based on my inquiry of the person of 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.

682-5113 SIGNATURE OF PRINCIPAL EXECUTIVE NUMBER REPORT THE DAILY MAXIMUM FOR BETZ DT-1 WHEN DISCHARGING (24 HR. COMP.) :

MG/L.

VENZON

(THE LIMIT IS 35 M

DATE

10

YEAR MO

20

DAY

.PA Form 3320-1 (REV 3/99) Previous editions may be used.

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

THIS IS A 4-PART FORM PAGE

TELEPHONE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) NAME OMB No. 2040-0004 BEAVER VALLEY POWER STATION MAJOR ADDRESSP D. BOX 4 PA0025615 (SUBR 05) PERMIT NUMBER ATTN: DAVID ORNDORE DISCHARGE NUMBER F - FINAL SHIPPIMGPORT PA 15077 DIESEL GEN & TURBINE DRAINS MONITORING PERIOD **FACILITY** YEAR MO DAY LOCATION *** NO DISCHARGE !__ | *** O1 10 31 FROM NOTE: Read Instructions before completing this form. ATTN: KEVIN OSTROWSKI QUANTITY OR LOADING QUANTITY OR CONCENTRATION FREQUENCY SAMPLE TYPE OF PARAMETER **ANALYSIS AVERAGE** MAXIMUM UNITS **AVERAGE** MAXIMUM UNITS MINIMUM FLOW, IN COMPUTT OR 03) *** *** *** SAMPLE 0 0.002 £5+ THRU TREATMENT PLANT MEASUREMENT 0.002 50050 1 0 0 REPORT REPORT WEEKLYESTIMA PERMIT 水本水水水水 **ሉ**ችቶችሉት. 松林松松松林 春松谷谷谷 EFFLUENT GROSS VALUE REQUIREMENT MO AVE DAILY MX MGD ** SAMPLE MEASUREMENT PERMIT. REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT 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 impresonment for knowledge leading. NAME/TITLE PRINCIPAL EXECUTIVE OFFICER **TELEPHONE** DATE Joseph W. Venzon 724 782-5113 20 01 SIGNATURE OF PRINCIPAL EXECUTIVE TYPED OR PRINTED OFFICER OR AUTHORIZED AGENT NUMBER YEAR MO including the possibility of fine and imprisonment for knowing violations. COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) EPA Form 3320-1 (REV 3/99). Previous editions may be used THICK A A DART FORM - DAGE

Form Approved.

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP. G. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

FACILITY LOCATION PA 15077

PERMIT NUMBER

PA0025615

012 A DISCHARGE NUMBER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) MAJOR (SUBR 05) F - FINAL Form Approved. OMB No. 2040-0004

MONITORING PERIOD YEAR YEAR MO 1 C DAY 31 MO DAY टा CI 121 FROM

BLOWDOWN FROM THE HVAC UNIT *** NO DISCHARGE | __ | ***

NOTE: Read instructions before completing this form. ATTM: KEVIN OSTROWSKI QUANTITY OR CONCENTRATION QUANTITY OR LOADING FREQUENCY SAMPLE OF PARAMETER ANALYSIS UNITS MAXIMUM **AVERAGE** UNITS MINIMUM **AVERAGE** MAXIMUM 12) 不本本本本本 杂衣亦亦称衣 なななななな SAMPLE 1/31 8,38 8.38 Grab MEASUREMENT ONCEZ GRAB 本本本本本本 7.0 00400 1 0 0 存余衣存衣衣 经验的数据的 的 PERMIT MAXIMUM MONTH *** MINIMUM EFFLUENT GROSS VALUE REQUIREMENT **** 03) *** 茶茶茶茶茶茶 FLOW, IN COMPULT OR SAMPLE 1/31 6.001 0 Z0.001 Est THRU TREATMENT PLANT MEASUREMENT 法非法 经存在存款的 REPORT REPORT DNCE/ ESTIMA 50050 1 0 0 本本本本本本本 水谷水水水水 PERMIT MONTH *** EFFLUENT GROSS VALUE REQUIREMENT MO AVG DAILY MX MGD SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE . MEASUREMENT PERMIT REQUIREMENT TELEPHONE DATE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 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 Joseph W. Venzon 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. Manager 20 Chemistry 7241 682-5113 01 10 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT NUMBER YEAR MO DAY

TYPED OR PRINTED

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP D. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT LOCATION

PA 15077

PA0025615 PERMIT NUMBER

MONITORING PERIOD

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) DIB. A DISCHARGE NUMBER

MAJOR

(SUBR 05) F - FINAL BIG JAATUG Form Approved. OMB No. 2040-0004

FACILITY		•	\		ITOHING PERIOD	NO DAY					
OCATION	`		FROM VEAR	MO DA	YEAR TO UI	MO DAY 10 31 **	* NO DIS				
ATTN: KEVIN DETROWSK	i.I						NOTE: Read ins	tructions befor			
		QUAN	ITITY OR LOADING	.	G	NUANTITY OR CON	CENTRATION		NO.	FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
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REDRINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	********	******		****	0.42	0.58	(17)	0	2/31	calc.
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7	SAMPLE MEASUREMENT										
·	PERMIT REQUIREMENT										
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NAME/TITLE PRINCIPAL EXECUTIVE O	prepare	under penalty of law that d under my direction or s	pervision in accordance	with a system d		rd Hoffman	for -	TELEPHON	1E	- D/	ATE
Joseph W. Venza	to assur submitte or those	re that qualified personnel ed. Based on my inquiry of persons directly respons	of the person or persons vible for gathering the infor	who manage the rmation, the info	e system, ormation	VENZON	/				
Chemistry man	-77 I am aw	ed is , to the best of my kr are that there are significa	nowledge and belief, true, ant penalties for submitting	accurate, and o g false informati	complete. SIGNA	TURE OF PRINCIPAL	EXECUTIVE	724, 682-			10 20 MO DAY
TYPED OR PRINTED		g the possibility of fine an		ng violations.	J OFF	OLA ON AUTHORIZE	2 AGENT	ODE NUMBE	:H	YEAR I	MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.
AS INDICATED ON SET 2001 DMR, SAMPLES FOR 320 QUARTEL MONITORING WORE DESTROYED IN SHIPPING. SAMPLES
COLECTED ON 1966/01 FOR CHANIDE & ANTIMONY WERE: LOIDZING/L FOR CHANIDE FREE TOTAL AND GIOLD IN PAGE. OF
EPA FORM 3320-1 (REV 3/99) Previous editions may be used.

LOWING SEE NAIVIE/AUDINESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP. D. BOX 4 ATTN: DAVID GRNDORF FACILITY

LOCATION

PA 15077

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

101 A DISCHARGE NUMBER

MAJOR

(SUBR 05)

Form Approved. OMB No. 2040-0004

PERMIT NUMBER MONITORING PERIOD YEAR MO DAY YEAR MO DAY 01 FROM TO CI 10

F - FINAL 101 CHEMICAL WASTE TREATMENT

	YEAR	MO DAY		MO DAY			-		
ATTN: KEVIN OSTROWSKI	FROM GI	10 01	то от	10 31 **	* NO DISCH NOTE: Read Instr	HARGE I	e comp	#☆# leting this	form.
PARAMETER	QUANTITY OR LOADING		Q	UANTITY OR CON				FREQUENCY OF	
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COSSO 1 O O PERMIT ***** EFFLUENT GROSS VALUE REQUIREMENT		*** ****	***	30 MD AVG	OO DAILY MX	MG/L	WE	EKĽYO	
MEASUREMENT	· ************************************		****	L 5.0	L 5.0	(19)	0	1/7	Grab
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TOTAL (AS N) MEASUREMENT	***		*****	*	*	(19)	*	*	*
FFLUENT GROSS VALUE REQUIREMENT		****	****	REPORT MO AVG	REPORT DAILY MX	MG/L		EKLYG	
THRU TREATMENT PLANT MEASUREMENT	22.9 C	03)	****	****	****		0	daily	Cont
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SAMPLE MEASUREMENT						- Land	VI-4/96 (82 84)		
PERMIT REQUIREMENT									
	of law that this document and all attach ection or supervision in accordance with		d Davi	diffmon to		TELEPHONE		_ DAT	E
submitted. Baselined or or those persons direct	personnel properly gather and evaluate ny Inquiry of the person or persons who ily responsible for gathering the informa-	e the information o manage the systematics of the information	m,	IVENZON					
submitted is , to the bet	st of my knowledge and belief, true, act re significant penalties for submitting fa of fine and imprisonment for knowing	curate, and complet	te. SIGNATU	JRE OF PRINCIPAL EX	RECUTIVE AREA	1 682-5		O1 10	

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

YDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP. * Plant not in Wet lay up.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME BEAVER VALLEY POWER STATION ADDRESSP O. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

FACILITY LOCATION PA 15077

PERMIT NUMBER

PA0025615

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) 102 A DISCHARGE NUMBER

MAJOR

F - FINAL

Form Approved. OMB No. 2040-0004 (SUBR 05)

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM OI

102 INTAKE SCREENHOUSE *** NO DISCHARGE | ***

NOTE: Read Instructions before completing this form.

ATTM: KĖVIN OSTROWSKI							NOTE: Read Instru	ictions befor	e comp	pleting this i	orm.
		QUAN	TITY OR LOADING		Q	UANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
PH	SAMPLE MEASUREMENT	***	公共本本本本		7,94	******	8.02	(12)	0	2/31	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***	******	**** ****	5.0 MINIMUM	****	7. C MAXIMUM	βú	1 S. 1280 425 339 W. H.	WICE/G	RAE
SOLIDS TOTAL SUSPENDED N	SAMPLE MEASUREMENT	****	各族族族族族		******	5.0	6.0	(1.5)	0	2/31	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	******	***	*****	30 MD AVG	100 DAILY MX			MICE/G	RAB
DIL & GREASE	SAMPLE MEASUREMENT	本本本本本本	***		各条条条条	<i>45.0</i>	25.0	(19)	0	2/31	Grab
00558 1 0. 0 Effluent gross value	PERMIT REQUIREMENT	族类素称杂类	☆ 在表示未存录 ■	计计计计		MD AVG	PO DAILY MX	MG/L		VICE/G MONTH	RAB
THRU TREATMENT PLANT		∠0.001	∠ 0.001	(03)	******	****	*****		0	2/31	Est
SOOSO 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	水块块水涂料	*****	非异种共产生	****		MICE/E	311MA
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	PERMIT REQUIREMENT						and the second s				
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184	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFF JOSEPH W. Venzo	prepared to assur submitte	d under my direction or so e that qualified personnel ed. Based on my inquiry o	this document and all atta upervision in accordance of properly gather and evaluation of the person or persons v	with a system d late the informa who manage the	atlon system,	JUL ZON	for -	TELEPHON			TE
Chemistry Manag	submitte I am awa	ed is , to the best of my kr are that there are significa	ible for gathering the informowledge and belief, true, int penalties for submitting dimprisonment for knowled	accurate, and o false informati	complete. SIGNA	TURE OF PRINCIPAL		전 682 NUMBE		OI 1	

EPA Form 3320-1 (REV 3/99) Previous editions may be used.

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESS⇔ O. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

PA 15077

FACILITY LOCATION

PA0025615 PERMIT NUMBER DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

Form Approved. OMB No. 2040-0004

MONITORING PERIOD MO DAY YEAR MO DAY 01 10 31 FROM 10

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

SLUDGE SETTLING BASIN *** NO DISCHARGE |__ | ***

NOTE: Read Instructions before completing this form. ATTN: KEVIN OSTROWSKI NO. FREQUENCY SAMPLE QUANTITY OR CONCENTRATION QUANTITY OR LOADING OF TYPE PARAMETER ANALYSIS MAXIMUM UNITS MAXIMUM UNITS MINIMUM **AVERAGE AVERAGE** 12) FH *** 经营业业的 *** 2/31 SAMPLE 8.01 Grab 7,8 MEASUREMENT 9. O TWICE/GRAD 00400 : 0 0 5.0 **** PERMIT . **科科科科特** 安安安安安 电子法法 MUMIXAM HONTH EFFLUENT GROSS VALUE MINIMUM REQUIREMENT 经共产业 119) SOLIDS, TOTAL **农农农农农农** 2/31 24 65 *** 经验检验检验 SAMPLE 17.8 12.9 Comp MEASUREMENT SUSPENDED TWICE/COMP24 00530 1 0 30 00 **** 计计划器 计存储存储器 **卡格特特特特** PERMIT EFFLUENT GROSS VALUE REQUIREMENT *** MO AVG DAILY MX MG/L MONTH 03) FLOW, IN COMDUIT OR *** *** SAMPLE 表表示表示表 2/31 0.010 EST 0.052 THRU TREATMENT PLANT MEASUREMENT TWICE/ESTIMA 50050 1 0 0 REPORT REPORT *** *** *** PERMIT HTMOM EFFLUENT GROSS VALUE REQUIREMENT MO AVG DAILY MX MGD SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT TELEPHONE DATE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon Chemistry Manager 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 bellef, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, locklying the possibility of fine and imprisonment for knowledge latters. including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

20 0.1 10 724, 682-5113 AREA NUMBER МО DAY YEAR

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

 ${\tt PERMITTEE\ NAME/ADDRESS\ (\it Include\ Facility\ Name/Location\ if\ Different)}$ NAME BEAVER VALLEY POWER STATION ADDRESSP D. BOX 4

ATTM: DAVID DRNDORF

SHIPRINGPORT

LOCATION

PA 15077

PA0025615 PERMIT NUMBER

FROM OI

YEAR MO DAY

10

DI.

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

YEAR MO DAY

MONITORING PERIOD

Form Approved. OMB No. 2040-0004

F - FINAL

MAJOR

(SUBR 05)

UNIT 2 SERVICE WATER BACKWASH

*** NO DISCHARGE |X | ***

ATTN: KEVIN OSTROWSK	I	QUANTITY OR LOADING QUANTITY OR CONCENTRATION					ctions befor	e comp	leting this i	orm.	
		QUAN	ITITY OR LOADING	•	Qt	UANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
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	******	计学专业分子	*******	*** ****	3	EEKLYE	STIMA
	SAMPLE MEASUREMENT	·						1			
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon

Chemistry Manager TYPED OR PRINTED

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.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

724 682-5113 AREA NUMBER 20 01 10 YEAR МО DAY

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

TELEPHONE

DATE

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP. C. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT LOCATION

PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) PA0025615

MONITORING PERIOD

PERMIT NUMBER

111 A DISCHARGE NUMBER MAJOR (SUBR 05) Form Approved. OMB No. 2040-0004

F - FINAL 111 DIESEL GENERATOR BLDG

ATTN: KEVIN DSTROWSK	. 1		FROM 21	10 0	TO UE	10 31 **	NOTE: Read Instru				form.
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₹ १-₹	SAMPLE MEASUREMENT	****	安康宗宗宗			***		(-12)			
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DIL % GREASE	SAMPLE MEASUREMENT	****	各族族族族					(19)			
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	PERMIT REQUIREMENT					10					
NAME/TITLE PRINCIPAL EXECUTIVE O	nranar <i>a</i>	y under penalty of law that ed under my direction or s are that qualified personnel	upervision in accordance	with a system d	esigned (widtfoffme	n for	TELEPHON	1E	- DA	ATE
Joseph W. Venzo	l or those	ted. Based on my inquiry	of the person or persons	who manage the	e system,	VENZON					
Chemistry Man	ager submitt	ted is , to the best of my ki	nowledge and belief, true,	accurate, and o	complete. SIGNA	TURE OF PRINCIPAL		24, 682			10 20 10 DAY
TYPED OR PRINTED COMMENTS AND EXPLANATION OF A	includir	ng the possibility of fine an	d Imprisonment for knowl	ing violations.	OFF	TOER OR AUTHORIZE	CO.	DE NUMBE	.H()	YEAR M	MO DAY
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EPA Form 3320-1 (REV 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP G. BOX 4

ATTN: DAVID ORMDORF

SHIPPINGPORT - FACILITY

LOCATION

PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) PA0025615 PERMIT NUMBER

YEAR MO DAY

01 10 01

FROM

MONITORING PERIOD

U1

DISCHARGE NUMBER

Form Approved. OMB No. 2040-0004 (SUBR 05)

F - FINAL YEAR MO DAY OI IO 31

MAJOR

UNIT 2 SEWAGE TMT PLANT

*** NO DISCHARGE |__ | *** NOTE: Read Instructions before completing this form.

ATTN: KEVIN OSTROWS	(]						NOTE: Read instru	ictions befor	e comp	oleting this	iorm.
		QUAN	ITITY OR LOADING		G	QUANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	<u> </u>	ANALYSIS	
F14	SAMPLE MEASUREMENT	****	***		6.59	***	7.55	(12)	0	2/31	Grab
CO400 1 0 0 Effluent gross value	PERMIT REQUIREMENT	****	移移经外货款 数	存存存存	5.0 MINIMUM	格拉拉拉拉	P. O MAXIMUM	₽Ņ		MICE/6 MONTH	RAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	,特殊特殊特殊	存长条件条件		格拉格格格	4.6	4.8	(19)	0	2/31	8 hr Comp
	PERMIT. REQUIREMENT	*****	********	***	****	MO AVG	BO DAILY MX	MG/L		NICE/C	Unia
	SAMPLE MEASUREMENT		0.063	(03)	*****	****	****		0	1/7	meas.
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.043 MO AVG	REPORT DAILY MX	MGD.	****	存保存格格	* *****	***	W	EEKLYM	EASHD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT		******		****	0,44	0.60	(19)	0	2/31	Grab
50060 1 0 1 Effluent gross value	PERMIT REQUIREMENT	*****	表的表件检查 嵌	*** ****	*****	1.4 MO AVG	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	MG/L	230 Takes State 500	MICE/6	RAU:
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	****	****		*******	7.1	****	(13)	0	2/31	Grab
74055 1 0 0 Effluent gross value	PERMIT REQUIREMENT	*****	* 安林春春春	*** ***	各长长长长	MO GEOMN	*************************************	LOOML	100000000000000000000000000000000000000	WICE/6	
POD, CARBONACEOUS O5 DAY, 200	SAMPLE MEASUREMENT	****	****	,	格拉拉拉拉	15.2	28,3	(19)	0	2/31	Comp
SOOSE 1 O O EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	* ***	特格特 特格特特	****	25 MO AVG	50 DAILY MX	MG/L	100 B 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5	MICE/C	OMP-8
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					100					
NAME/TITLE PRINCIPAL EXECUTIVE O	prepar	y under penalty of law that ed under my direction or s	upervision in accordance	with a system d		sd Hoffmen	To-	TELEPHON	IE.	DA	TE
Joseph W. Venz	submit	ure that qualified personnel tted. Based on my inquiry	of the person or persons v	vho manage the	system,	JUENZON					
Chemistry Man	a g o submit	se persons directly respons tted is , to the best of my kr ware that there are significa	nowledge and belief, true,	accurate, and o	omplete. SIGNA	TURE OF PRINCIPAL	EXECUTIVE 72	4,682-			
TYPED OR PRINTED	Includi	ng the possibility of fine an	d imprisonment for knowl	ng violations.	OFF	ICER OR AUTHORIZE	D AGENT ARE	A NUMBE	R _.	YEAR N	O DAY
COMMENTS AND EXPLANATION OF A	MA AIOEALIONS (F	чынгелсе ан апаслт	ынк пеге)								

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP. D. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT FACILITY

LOCATION

PA 15077

PA0025615 PERMIT NUMBER

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

MAJOR (SUBR 05) Form Approved. OMB No. 2040-0004

F - FINAL 201 SOFTENER REGENERANTS

MONITORING PERIOD YEAR MO DAY 01 10 31 01 10 01 FROM

*** NO DISCHARGE IXI ***

ATTM: KEVIN OSTROWSK	I			 			NOTE: Read Ins	tructions befor	é com	pleting this	form.
		QUAN	ITITY OR LOADING	3		QUANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
F 	SAMPLE MEASUREMENT	***	***			****		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	*****	***	5.0 MINIMUM	*****	7. O MAXIMUM	SŲ		WICE/G MONTH	RAB
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DIL & GREASE	SAMPLE MEASUREMENT	***	***		***			(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***	\$ \$\$\$\$\$\$\$	***	****	MO AVE	DAILY MX	550,000	\$5555555555565	WICE/S MONTH	КАВ
FLOW, IN COMDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	***	****	****				
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVO	REPORT DAILY MX	MGD	*****	****	*****	***	E31095003050	WICE/E MONTH	SIIMA
	SAMPLE MEASUREMENT							MARKET .			
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Joseph W. Veuzo Chemistry Man		under penalty of law that d under my direction or si re that qualified personnel ed. Based on my inquiry e persons directly respons	upervision in accordance I properly gather and eval of the person or persons	with a system d luate the informa who manage the	ation system,	vidafofmen IVENZON	for	TELEPHON			ATE
TYPED OR PRINTED	0 Includir	ed is , to the best of my kr vare that there are significang the possibility of fine an	nowledge and belief, true, ant penalties for submittin to imprisonment for know	, accurate, and o g false informati	complete. SIGNA	ATURE OF PRINCIPAL FICER OR AUTHORIZE		724, 682-			0 20 10 DAY
COMMENTS AND EXPLANATION OF AN	IY VIOLATIONS (R	eference all attachm	ents here)								

 ${\tt PERMITTEE\ NAME/ADDRESS\ (Include\ Facility\ Name/Location\ if\ Different)}$

NAME BEAVER VALLEY POWER STATION ADDRESSP.O. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT PA 15077

FACILITY LOCATION

PERMIT NUMBER

PA0025615

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) 203 A DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL Form Approved. OMB No. 2040-0004

MONITORING PERIOD YEAR MO DAY YEAR MO DAY OI FROM

*** NO DISCHARGE | __ | *** NOTE: Read Instructions before completing this form.

MAIN SEWAGE TMT PLANT

TTN: KEVIN OSTROWSKI PARAMETER					· ·		NOTE: Read Instru				
PARAMETER		QUAN	TITY OR LOADING	· .	Q	UANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLE
·	\rightarrow	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	,,,,
784	SAMPLE MEASUREMENT	***	****		7.05	***	7.4	(12)	0	2/3/	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT	长谷谷谷谷	****	***	5.0 MINIMUM	*****	7.0 MAXIMUM	Ş U		WICE/ MONTH	RAB
SOLIDS TOTAL SUSPENDED	SAMPLE MEASUREMENT	****	*****		*****	26.1	43	(149)	0	4/31	8 hr Comp
00530 1 0 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	***	*****	*** ****	****	MD AVG	DAILY MX	MG/L		WICE/ MONTH	OMP-
LOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.010	0.019	(03)	***	****	***		0	1/7	meas
50050 : 0 0 EFFLUENT GROSS VALUE	CONSTRUCTION OF THE PERSON OF	0,023 MD AV9	REPORT DAILY MY	ueb	长林林林林	华泽芬林科林	经本本条件 	***	W	EEKLY	1EASR
CHLORINE, TOTAL	SAMPLE MEASUREMENT	***	******		***	0,28	0.45	(19)	0	2/31	Grat
FOOGO 1 0 1 FFFLUENT GROSS VALUE	PERMIT REQUIREMENT	授权安抚条件	各格特格特 化	***	****	1.4 MO AVG	E.3 XAM TENI	MG/L		WICE/ MONTH	=KAU
COLIFORM, FECAL SENERAL	SAMPLE MEASUREMENT	***	茶茶茶茶茶		***	38.2	****	(13)	0	2/31	Gras
74055 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	化苯基苯基苯 花	****	*****	MD GEOMN	*****	LOOML		WICE/ MONTH	
. C	SAMPLE MEASUREMENT	****	*****		格格格格格格	9.0	9.5	(19)	0	2/3/	8 hr Com
BODB2 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	存存存存 存存存	*****	P5 MO AVG	DAILY MX	MG/L		MICE/ MONTH	JOHN T
	SAMPLE MEASUREMENT							<u>.</u>			
Miles	PERMIT REQUIREMENT					10			\$		
NAME/TITLE PRINCIPAL EXECUTIVE OF Joseph W. Venzo	prepare	under penalty of law that ad under my direction or s re that qualified personne	upervision in accordance properly gather and eval	with a system duate the informa	tion I	widthoffmen	for	TELEPHON	IE .	, D	ATE
Chemistry Mana	or those submitted	ed. Based on my inquiry e persons directly respons ed is , to the best of my ki vare that there are significa	nowledge and belief, true,	accurate, and c	omplete. SIGNA	TURE OF PRINCIPAL		24 682-			10 20 MO DA
TYPED OR PRINTED COMMENTS AND EXPLANATION OF AN	includin	ng the possibility of fine ar	d Imprisonment for know	ing violations.	OFF	TIGER OR AUTHORIZE	D AGENT AR	NUMBE	H	YEAR I	MO DA

EPA Form 3320-1 (REV 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP.D. BOX 4

ATTN: KEVIN OSTROWSKI

OCATION

ATTN: DAVID ORNDORF SHIFFINGFORT

FA 15077

PA0025615 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL

211 TURBINE BLDG

*** NO DISCHARGE | | *** NOTE: Read Instructions before completing this form.

Form Approved. OMB No. 2040-0004

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		, n	DIINON	HING	PEHIOL	,	1.
	YEAR	MO.	DAY		YEAR	МО	DAY
FROM	01	10	O.	TO	01	10	31
FROM	7.7.3.	20	~ L	10	- C 1	,c ()	

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

SELM: WEATH OPEROMON	T.	, , , , , , , , , , , , , , , , , , , 							11.0	T====:	CANADIE
		QUAN	TITY OR LOADING		G	QUANTITY OR CON	CENTRATION		NO.	FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
*}•	SAMPLE MEASUREMENT	****	****		6.87	****	8,44	(12)	0	1/7	Grab
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BOLIDS, TOTAL BUSPENDED	SAMPLE MEASUREMENT	*****	*****		****	24.0	24.0	(19)	0	1/7	Grab
00530 ! 0 0 Effluent gross valu <mark>e</mark>	PERMIT REQUIREMENT	*****	***	*** ****	***	OE OVA OM	DAILY MX		W	EEKLYG	RAB
CIL & GREAGE	SAMPLE MEASUREMENT	***	***	· .	25.0	25.0	25,0	(19)	0	1/7	Grab
20556 1 0 0 Effluent <mark>gross value</mark>	PERMIT REQUIREMENT	****	· 计算计算符件 计	异林林林	MO AVO	DAILY MX	BO INST MAX	MG/L	W	EEKLYG	КАВ
	SAMPLE MEASUREMENT	0.002	0.002	(03)	****	****	****		0	1/7	Est.
50050 1 0 0 Effluent <mark>gross value</mark>	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	4GD	格格林格斯塔	******	松松华代春桥	****	W	EEKLYE	SIIMA
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT		444	,		111					
NAME/TITLE PRINCIPAL EXECUTIVE O	prepare	under penalty of law that ed under my direction or su	pervision in accordance	with a system d		wid foffmin	tor -	TELEPHON	1E	DA	TE
Joseph W. Venza	submitt or thos	re that qualified personnel ted. Based on my inquiry of e persons directly respons	of the person or persons vible for gathering the info	who manage the rmation, the info	system, rmation	VENZON		ن د د			
Chemistry Manag TYPED OR PRINTED	submitt I am av	ted is , to the best of my kn vare that there are significa ng the possibility of fine an	owledge and belief, true, nt penalties for submitting	accurate, and c	omplete. SIGNA	TURE OF PRINCIPAL	EXECUTIVE A	24,682-3		YEAR M	

PA Form 3320-1 (REV 3/99) Previous editions may be used.

 ${\tt PERMITTEE\ NAME/ADDRESS\ (Include\ Facility\ Name/Location\ if\ Different)}$ NAME BEAVER VALLEY POWER STATION ADDRESSP. O. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

LOCATION

PA 15077

FROM

213 A DISCHARGE NUMBER

YEAR MO DAY

CI

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

MONITORING PERIOD

PA0025615

PERMIT NUMBER

YEAR MO DAY

MAJOR (SUBR 05) F - FINAL

Form Approved. OMB No. 2040-0004

UNIT 2 COOL TOWER PUMPHOUSE

*** NO DISCHARGE | X | ***

ATTM: KEVIN OSTROWSP	i						NOTE: Read Instru	ictions befor	e com	oleting this	form.
		QUAN	ITITY OR LOADING	ì	G	UANTITY OR CON	CENTRATION		NO. EX	FREQUENC) OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
본선	SAMPLE MEASUREMENT	称称称称称称	本本本本本本			****		(12)		·	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	· 格林林林林	*****	*** ****	6.0 MINIMUM	****	7.0 MAXIMUM	au au		MICEN(IRAB
SOLIDS: TOTAL SUSPENDED	SAMPLE MEASUREMENT	、 各种各种各种	****		********	,		(17)			·
00530 i 0 0 Effluent Gross value	PERMIT REQUIREMENT	******	작작작작작곡 >	*** ****	使创新标准符	30 MD AVG	DAILY MX	MG/L		WICE/(MONTH	RAB
DIL & GREASE	SAMPLE MEASUREMENT	各条条条条条	****		******			(17)			11.00
00556 1 0 0 Effluent gross value	PERMIT. REQUIREMENT	华水水井木木	*************************************	**** ****	特殊分类特殊	MO AVG	DAILY MX	MG/L		WICE/(YOMTH	RAB.
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	PERMIT REQUIREMENT					101				22.4	
Joseph W. Venzo	prepare	vunder penalty of law that ed under my direction or so re that qualified personnel	upervision in accordance	with a system o	designed ation	und Hoffmer	for	TELEPHON	VE	- D	ATE
Chemistry Manag	or thos	ed. Based on my inquiry e persons directly respons ed is , to the best of my kr	sible for gathering the info nowledge and belief, true.	rmation, the info accurate, and	complete.	TENZON TURE OF PRINCIPAL	EXECUTIVE 7.	24,682	5113	01	10 20
TYPED OR PRINTED	Lam av	vare that there are significang the possibility of fine an	ent penalties for submitting	false informat		ICER OR AUTHORIZE		DE NUMBE			MO DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP. G. BOX 4

ATTN: DAVID ORNDORF

SHIFFINGPORT **FACILITY**

LOCATION

PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) PA0025615

MAJOR <u> 301 A</u> DISCHARGE NUMBER F - FINAL Form Approved. OMB No. 2040-0004

PERMIT NUMBER MONITORING PERIOD YEAR MO. MO DAY

UNIT 2 AUX BOILER BLOWDOWN *** NO DISCHARGE | __ | ***

(SUBR 05)

10 01 01 10 31 FROM NOTE: Read Instructions before completing this form. ATTN: KEVIN DSTROWSKI SAMPLE QUANTITY OR CONCENTRATION NO. FREQUENCY QUANTITY OR LOADING EX OF TYPE PARAMETER **ANALYSIS AVERAGE** MAXIMUM UNITS **AVERAGE** MÄXIMUM UNITS MINIMUM 19) SOLIDS, TOTAL 本本本本本本 本本本本本本 不本本本本本 SAMPLE 1/31 6,0 6.0 Grab SUSPENDED MEASUREMENT TWICE/GRAB LOO 00530 1 0 0 乔本奈奈森族 拉拉拉拉 经存货条款 ***** PERMIT HONTH EFFLUENT GROSS VALUE REQUIREMENT 外谷林林 MO AVG DAILY MX MG/L * 1/31 197 本本本本本本 DIL & GREASE 本本本本本本 本本本本本本本 SAMPLE 45.0 L 5.0 Grab **MEASUREMENT** TWICE/GRAD 经依款保险税 作业社会 计不存储器 00556 1 0 0 PERMIT 女长松松松松 DAILY MX HTMON MG/L REQUIREMENT MO AVG *** EFFLUENT GROSS VALUE 李术乔本本本 杂杂茶茶茶茶 FLOW, IN COMPUTE OR 03) 经经营经济经 SAMPLE 40.001 L 0.001 Est THRU TREATMENT PLANT MEASUREMENT WEEKLYESTIMA REPORT 计算条件 未不益素 非常有效保险 50050 1 0 0 REPORT PERMIT 本本本本本本 本本本本 REQUIREMENT MD AVG DAILY MX MGD EFFLUENT GROSS VALUE SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT

REQUIREMENT NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W Venzon Chemistry Manager TYPED OR PRINTED

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.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

20 724 ₁682-5113 01 10 AREA NUMBER YEAR MO DAY occurred in Oct.

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

PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT

> one discharge Only

TELEPHONE

DATE

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP.D. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

FACILITY LOCATION

PA 15077

PERMIT NUMBER MONITORING PERIOD YEAR MO DAY YEAR MO DAY OI OI. C.I. 10 31 FROM

PA0025615

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) MAJOR (SUBR 05) DISCHARGE NUMBER F - FINAL

303 A

Form Approved. OMB No. 2040-0004

*** NO DISCHARGE |__| ***

UNIT 1 DIL WATER SEPARATOR

NOTE: Read instructions before completing this form. ATTN: KEVIN OSTROWSKI QUANTITY OR CONCENTRATION NO. FREQUENCY SAMPLE QUANTITY OR LOADING TYPE OF PARAMETER **ANALYSIS** MAXIMUM UNITS **AVERAGE** MAXIMUM UNITS MINIMUM **AVERAGE** **** 12) 水水水水水水 李松松松松香 SAMPLE 1/7 9,15 Grab 7.63 MEASUREMENT WEEKLYGRAB 00400 1 0 0 5.0 *** 9. O 长松松松松 安存谷谷 *** PERMIT EFFLUENT GROSS VALUE REQUIREMENT MAXIMUM MINIMUM 格格特特 SULIDS, TOTAL 39) 茶茶茶茶茶茶 **长长长长长** SAMPLE *** 1/7 7.8 17.4 Grab MEASUREMENT SUSPENDED WEEKLYGRAB 00530 1 0 **0** 经存款的 经 计图片 *** PERMIT *** EFFLUENT GROSS VALUE REQUIREMENT 经安格特 MO AVG DAILY MX MG/L OIL & GREASE **安安安安安** 19) *** 经基本条件 SAMPLE Grab 12,0 MEASUREMENT WEEKLYGRAB 00556 1 0 0 松松松松松松 松松松松 PERMIT *** **** EFFLUENT GROSS VALUE REQUIREMENT **◆◆◆** MO AVG DAILY MX MG/L FLOW, IN CONDUIT OR 03) 本本本本本本 *** ** SAMPLE 1/7 0.019 0.056 Est. THRU TREATMENT PLANT MEASUREMENT REPORT WEEKLYESTIMA 50050 1 0 0 REPORT *** *** 计格特殊转移 计数字符件 PERMIT EFFLUENT GROSS VALUE REQUIREMENT MD AVG DAILY MX SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT TELEPHONE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I Certify under penalty of law that this document and all attachments were DATE 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 Joseph W. Venzon

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

* See attached letter.

THIS IS.A.4-PART FORM PAGE .

724,682-*511*3

AREA NUMBER

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

20

10

YEAR MO DAY

01

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY FOWER STATION ADDRESSPID. BOX 4

ATTM: DAVID ORNDORF

SHIPPINGPORT

FACILITY LOCATION PA 15077

PERMIT NUMBER

313 A DISCHARGE NUMBER MAJOR

(SUBR Q5)

F - FINAL

Form Approved. OMB No. 2040-0004

MONITORING PERIOD YEAR MO DAY 01 10 31 то 01

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

PA0025615

313 TURBINE BLDG DRAIN

*** NO DISCHARGE | | ***

NOTE: Read Instructions before completing this form.

ATTN: KEVIN OSTROWSK	1		FROM U	10 0	1 TO 731	10 31 **	NOTE: Read Ins				form.
PARAMETER		QUAI	NTITY OR LOADING	}	G	QUANTITY OR CON	CENTRATION	· · · · · · · · · · · · · · · · · · ·	NO. EX	FREQUENCY OF	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
≓H	SAMPLE MEASUREME	******	****	,	7.26	****	7.96	(12)	0	1/7	Grab
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00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREME	###### NT	李林泰林华传	***	****	30 MO AVG	100 DAILY MX	MG/L	W.	EEKLYC	RAB
DIL & GREASE	SAMPLE MEASUREME		***		****	<5	<5	(19)	0	1/7	Grab
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NAME/TITLE PRINCIPAL EXECUTIVE OF	pre	ertify under penalty of law that pared under my direction or so assure that qualified personnel	upervision in accordance v	vith a system de	signed	evid Hoffman	for -	TELEPHON	E	- DA	TE
Joseph W. Venzon	sub	mitted. Based on my inquiry of	of the person or persons with the information	the manage the	system,	ENZON					
Chemistry mana TYPED OR PRINTED	sub lar	pmitted is , to the best of my kr m aware that there are significal luding the possibility of fine an	nowledge and belief, true, a ant penalties for submitting	accurate, and co	omplete. SIGNA	TURE OF PRINCIPAL I		24 682-3		OI /C	
COMMENTS AND EXPLANATION OF AN				3	·			ODE I			

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY FOWER STATION ADDRESSP. D. BOX 4

ATTN: DAVID DRNDORF FACILITY SHIPPINGPORT

LOCATION

PA 15077

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

PA0025615 401 A PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL Form Approved. OMB No. 2040-0004

MONITORING PERIOD YEAR MO DAY YEAR MO DAY UI FROM 10

CHEM. FEED AREA OF AUX BOILERS *** NO DISCHARGE | X | ***

ATTN: KEVIN OSTROWSK	I		FROM _ = 1		** 10 3* 1	10 34 ~*	NOTE: Read Inst	tructions befor	e coult	oleting this	form.
PARAMETER		QUAN	ITITY OR LOADING	ì		QUANTITY OR CON	CENTRATION		NO.	FREQUÉNC) OF	SAMPLE
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EFFLUENT GROSS VALUE		*****		*** ***	经收收收收款	BO MD AVG	LOO DAILY MX	MG/L	1022088000000	ADNTH AICE\0	RAB
1	SAMPLE MEASUREMENT	****	******		*******		3	(19)			
COSSE 1 O C EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR		*****	· 神经外外的基 · 会	***		MO AVG	PO DAILY MX	26487	1,202,000,000	VICE/G 10NTH	RAB
THRU TREATMENT PLANT		REPORT	REPORT	(03)	****	****	***				N/ .
EFFLUENT GROSS VALUE	247-038-145-2-5-5-5-5-5-4-5-5-5-5-5-5-5-5-5-5-5-5	MO AVO		MGD	*****	*******	****	***	W	EKLYE	STIMA
	SAMPLE MEASUREMENT PERMIT			- -							
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	MEASUREMENT PERMIT							176			The common termination of
	REQUIREMENT										
	MEASUREMENT PERMIT										Balife Was excused
	REQUIREMENT					11	_				134 (1966)
Joseph W. Venzo	prepared to assure submitted	tunder my direction or su that qualified personnel p d. Based on my inquiry o	nis document and all attac pervision in accordance w properly gather and evalue if the person or persons wh	ith a system de ate the informati	signed lon system	rd Hoffmen	to	TELEPHONE		_ DA	re
Chemistry Mana	submitted i am awa including	persons directly responsit d is , to the best of my kno re that there are significan the possibility of fine and	ole for gathering the inform owledge and belief, true, a at penalties for submitting to imprisonment for knowing	nation, the infor occurate, and co false information	mation emplete. SIGNAT	TURE OF PRINCIPAL E	EXECUTIVE 72	24, 682-5 BA NUMBER		OI I	
COMMENTS AND EXPLANATION OF AN	Y VIOLATIONS (Re	ference all attachme	nte horo)				L CO	DE L MOMBER	<u> </u>	I EARL WI	J DAT

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP D. BOX 4

ATTN: DAVID ORNDORF

PA 15077 SHIPPINGPORT

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

MONITORING PERIOD

PACCES PERMIT NUMBER

MAJOR 403 A (SUBR 05) DISCHARGE NUMBER F - FINAL Form Approved. OMB No. 2040-0004

CONDENSATE BLOWDOWN & RIVR WAT *** NO DISCHARGE | X | ***

FACILITY	•		VEIST		YEAR	MO DAY					
LOCATION			FROM OI	MO DA		MO DAY 10 31 ★#	* NO DISCH	ARGE I	X	***	
ATTN: KEVIN OSTROWSK	1		FROM [NOTE: Read Instru	actions befor	e comr	eleting this t	form.
		QUAN	ITITY OR LOADING)	G	LUANTITY OR CON	CENTRATION			FREQUENCY	SAMPLE
PARAMETER			I						EX	OF ANALYSIS	TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			<u> </u>
구나	SAMPLE MEASUREMENT	长林长桥桥桥	****			**************************************		(12)			
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00530 1 0 <mark>0</mark> EFFLUENT <mark>GROSS VALUE</mark>	PERMIT REQUIREMENT	****	****	**** ***	特特特特特特	BO AVG	DAILY MX	MG/L	W	EEKLYG	RAB
CIL & GREASE	SAMPLE MEASUREMENT	******	******		******			(19)			
00556 1 0 0 Effluent gross value	PERMIT REQUIREMENT	******	*****	***	经基本条件	MD AVG	PO DAILY MX	MG/L	₩.	EEKLYG	наи
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	****	****		****			(-19)			
00610 1 0 0 Effluent <mark>gross value</mark>	PERMIT REQUIREMENT	****	******	**** ****	****	REPORT MO AVO	REPORT DAILY MX	MG/L	(%)	EEKLYG	RAB
CLAMTROL CT-1; TOTAL WATER	SAMPLE MEASUREMENT	****	***		***			(19)			
04251 1 0 <mark>0</mark> Effluent gross value	PERMIT REQUIREMENT	****	****	****	****	O MO AVO	DAILY MX	MG/L		JESCHR JESCHR	OMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	****	***	***				
50050 1 0 0 Effluent gross value	PERMIT REQUIREMENT	REPORT MD AVG	REPORT DAILY MX	MGD	非转移 整体整	****	****	***	ld)	BEKLYE	STIMA
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	***	校校校校校	,	林林林林林			(19)			
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	*****	****	*****	0.5 MO AVS	1.25 INST MAX	MG/L		EEKLYG	
NAME/TITLE PRINCIPAL EXECUTIVE O	FFICER Certify	under penalty of law that	this document and all atta upervision in accordance	achments were	esigned Day	rd thefun	fer	TELEPHON	1E	_ DA	TE
Joseph W. Venza	to assur	e that qualified personne ed. Based on my inquiry persons directly respons	i properly gather and eval of the person or persons sible for gathering the info	uate the informa who manage the rmation, the info	tion e system, ermation	VENZON					0.0
Chemistry Man	submitte	ed is , to the best of my ki	nowledge and bellef, true, ant penalties for submittin	accurate, and c	omplete. SIGNA	TURE OF PRINCIPAL		24,682-5			0 20
TYPED OR PRINTED	includin	g the possibility of fine ar	d imprisonment for know		OFF	FICER OR AUTHORIZE	CO CO	타 NUMBE	н.	YEAR M	O DAY

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

HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP REPORT THE DAILY MAXIMUM FOR BETZ D T-1 WHEN DISCHARGING (24 HR. COMP.): MG/L. (THE LIMIT IS 35 MG/L AS A DAILY MAX.)

EPA Form 3320-1 (REV 3/99) Previous editions may be used.

AGAGE COLONIA THIS IS.A.4-PART FORM PAGE .

 ${\tt PERMITTEE\ NAME/ADDRESS\ (\it Include\ Facility\ Name/Location\ if\ Different)}$ NAME BEAVER VALLEY POWER STATION ADDRESS=[O. BOX 4

ATTN: DAVID ORNDORF

FACILITY LOCATION

PA 15077

PAOG25615 PERMIT NUMBER

YEAR MO DAY

FROM 01 10 01

MONITORING PERIOD

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR) MAJOR 403 A (SUBR Q5) DISCHARGE NUMBER

YEAR MO DAY

то 01 10 31

Form Approved. OMB No. 2040-0004

F - FINAL CONDENSATE BLOWDOWN & RIVE WAT

*** NO DISCHARGE | X | *** NOTE: Read Instructions before completing this form.

ATTN: KEVIN OSTROWSKI		Sec.	NOTE: Read Ins	tructions befor	e comit	completing this form.					
· · · · · · · · · · · · · · · · · · ·		QUANTITY OR LOADING				QUANTITY OR CONCENTRATION				FREQUENCY OF	SAMPLE TYPE
PÄRAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	
YDRAZINE	SAMPLE MEASUREMENT	****	****		***			(19)			
1313 1 0 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	*****	**** ***	*****	0 MO AVG	DAILY MX	MG/L	W)	EEKLY®	RAB
	SAMPLE MEASUREMENT							1			
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	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT					1111	12	TELEDI IO	15	-	<u> </u>
Joseph W. Venzo	DZCDQZC	ed under my direction or some that qualified personne ed. Based on my inquiry	this document and all att supervision in accordance il properly gather and eval of the person or persons sible for gathering the info	with a system of uate the inform who manage the ermetion, the inf	ation e system,	J. VENZ		TELEPHON 724 682-			ATE
Chemistry Manager submi		d is , to the best of my knowledge and belief, true, accurate, and complete. are that there are significant penalties for submitting false information, g the possibility of fine and imprisonment for knowling violations.				SIGNATURE OF PRINCIPAL EXECUTIVE A A C			<i>5113</i> R		10 2 10 DA

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP REPORT THE DAILY MAXIMUM FOR BETZ D (THE LIMIT IS 35 MG/L AS A DAILY MAX.) T-1 WHEN DISCHARGING (24 HR. COMP.): MG/L.

EPA Form 3320-1 (REV 3/99) Previous editions may be used.

AAAAA JHIŞ IS.A.4-PART FORM PAGE,

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP D. BOX 4

ATTN: DAVID ORNDORF

ATTN: KEVIN OSTROWSKI

SHIPP INGPORT FACILITY LOCATION

PA 15077

PA0025615 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL

BULK FUEL STORAGE DRAIN

Form Approved.

OMB No. 2040-0004

*** NO DISCHARGE | | ***

NOTE: Read Instructions before completing this form.

	MONITORING PERIOD										
**	YEAR	MO	DAY		YEAR	МО	DAY				
FROM	01	10	01	TO	01	10	31				

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

		QUAN	ITITY OR LOADING	1	QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MÁXIMUM	UNITS		ANALYSIS	
타	SAMPLE MEASUREMENT	***	***		7.76	****	7.76	(12)	0	* 1/31	Greb
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	***	5.0 MINIMUM	****	9.0 MAXIMUM	ទបួ	M	EEKLY	IRAB
SOLIDS: TOTAL SUSPENDED	SAMPLE MEASUREMENT	****	***		***	44.0	24.0	(19)	0	*1/31	Grab
00530 1 0 0 Effluent gross value	PERMIT REQUIREMENT	*#**#	松松林林林林	新新春春 新香香	******	30 MO AVG	100 DAILY MX	8377 I	W	EEKLY(IRAB
OIL % GREASE	SAMPLE MEASUREMENT	****	****		*****	45.0	25.0	(19)	0	* 1/31	Grab
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***	*************************************	*** ***	***	MO AVG	PO DAILY MX	MG/L	W.	EEKLY(RAB.
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT		L0.001	(03)	*****	****	****		0	1/7	Est.
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD .	****	*****	*****	***	W.	EEKLYI	STIMA
	SAMPLE MEASUREMENT			· .							
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	PERMIT REQUIREMENT		and the second second second							31 6 4.67	
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NAME/TITLE PRINCIPAL EXECUTIVE O	prepar	y under penalty of law that ed under my direction or s	upervision in accordance	with a system d	esigned Ea	widtoffmen	for _	TELEPHON	ΙE	_ D/	ATE
Joseph W. Venzor		are that qualified personnel ted. Based on my inquiry	of the person or persons v	vho manage the	system.	TVENZON					
Chemistry Mana	ted is , to the best of my kr ware that there are significa	persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete ethat there are significant penalties for submitting false information.						5113	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0 20	
TYPED OR PRINTED	includi	ng the possibility of fine an	d imprisonment for knowi		OFF	ICEH OR AUTHORIZE	DAGENI	DE NUMBE	<u> </u>	YEAR N	MO DAY
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

* Only one discharge occurred in the month of Oct.

PFRMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSE, D. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

ATTN: KEVIN OSTROWSKI

FACILITY

LOCATION

PA 15077

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL

Form Approved.
OMB No. 2940-0004

UNIT 1 GENRTR BLWDWN FILT BW *** NO DISCHARGE | X | ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD YEAR MO DAY OI 10 31 YEAR MO DAY OI FROM 10 01

PA0025615

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

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	***	***		***			(19)			
00530 1 0 0 Effluent gross value	PERMIT REQUIREMENT	****	**********	**** ****	***	MO AV9	DAILY MX	MG/L	W	EEKLY	KAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	格特格格特	* *****	****	1			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MD AVG	REPORT DAILY MX	MeD	*****	*****	****	***	W	EEKLY	STIMA
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT PERMIT										
	REQUIREMENT SAMPLE	Associate 950 at 100 control									
	MEASUREMENT PERMIT										
NAME OF THE PRINCIPAL EXPOUTIVE OF	REQUIREMENT	y under penalty of law that	this document and all atta	achments were		Supple	12	TELEPHO	νE	D,	ATE
NAME/TITLE PHINCIPAL EXECUTIVE OFFICER											
Doseph W. Venzon Chemistry Manager Typed or Printed Typed or Pr						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT AREA NUMBER OF SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					10 20 MO DAY
COMMENTS AND EXPLANATION OF A	NY VIOLATIONS (i	ing the possibility of fine at Reference all attachn	nents here)	ing violations,			1 00				

EDA Form 3330.1 (DEV 3/00) Previous editions may be used

THIS IS.A.4-PART FORM PAGE

Paperwork Reduction Act Notice

Public reporting burden for this collection of information is estimated to vary from a range of 10 hours as an average per response for some minor facilities, to 110 hours as an average per response for some major facilities, with a weighted average for major and minor facilities of 18 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information, including suggestion for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, S.W. Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

General Instructions

- 1. If form has been partially completed by preprinting, disregard instruction directed at entry of that information already preprinted.
- 2. Enter "Permittee Name/Mailing Address (and facility name/location, if different)," "Permit Number," and "Discharge Number" where indicated. (A separate form is required for each discharge.)
- 3. Enter dates beginning and editing "Monitoring Period" covered by form where indicated.
- 4. Enter each "Parameter" as specified in monitoring requirements of permit.
- 5. Enter "Sample Measurement" data for each parameter under "Quantity" and Quality" as specified in permit. "Average" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "Monitoring Period"; "Maximum" and Minimum" are normally extreme high and low measurements obtained during "Monitoring Period". (Note to municipals with secondary treatment requirement: Enter 30-day average of sample measurements under "Average," and enter maximum 7-day average of sample measurements obtained during monitoring period under "Maximum.")
- 6. Enter "Permit Requirement" for each parameter under "Quantity" and "Quality" as specified in permit.
- 7. Under "No Ex" enter number of sample measurement during monitoring period that exceed maximum (and/or minimum or 7-day average as appropriate) permit requirement for each parameter. If none, enter "0".
- 8. Enter "Frequency of Analysis" both as "Sample Measurement" (actual frequency of sampling and analysis used during monitoring period) and as "Permit Requirement" specified in permit. (e.g. Enter "Cont," for continuous monitoring, "1/7" for one day per week, "1/30" for one day per month, "1/90" for one day per quarter, etc.)
- 9. Enter "Sample Type" both as "Sample Measurement" (actual sample type used during monitoring period) and as "Permit Requirement," (e.g. Enter "Grab" for individual sample, "24HC" for 24-hour composite, "N/A" for continuous monitoring, etc.)
- 10. Where violations of permit requirements are reported, attach a brief explanation to describe cause and corrective actions to be taken, and reference each violation by date.
- 11. If "no discharge" occurs during monitoring period, enter "No Discharge" across form in place of data entry.
- 12. Enter "Name/Title of Principal Executive Officer" with "Signature of Principal Executive Officer of Authorized Agent," "Telephone Number," and "Date" at bottom of form.
- 13. Mail signed Report to Office(s) by date(s) specified in permit. Retain copy for your records.
- 14. More detailed instructions for use of this Discharge Monitoring Report (DMR) form may be obtained from Office(s) specified in permit.

Legal Notice

This report is required by law (33 U.S.C. 1318; 40 C.F.R. 125.27). Failure to report or failure to report truthfully can result in civil penalties not to exceed \$10,000 per day of violation; or in criminal penalties not to exceed \$25,000 per day of violation, or by imprisonment for not more than one year, or both.