

February 8, 2002

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

NPDES Monthly Report, EPA Permit No. PA00025615

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 revised NPDES Monthly Report for December 2001 as submitted to the Pennsylvania Department of Environmental Protection.

The initial NPDES Monthly Report submitted to the Pennsylvania Department of Environmental Protection on January 28, 2002 was inadvertently submitted on January 2002 Discharge Monitoring Report (DMR) forms.

This revised submittal correctly reports NPDES data on December 2001 DMR forms.

Sincerely,

Joseph W. Venzon Chemistry Manager

DJS

C: J.W. Venzon
T. Cosgrove
Tiffany Shepard
Licensing File

Central File

5225

NAME

BEAVER VALLEY POWER STATION

ADDRESS O. BOX 4.

ATTN: DAVID GRNDORF

FACILITY

PA 15077

LOCATION

ATTN: KEVIM OSTROWSKI

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

PAGG25615 PERMIT NUMBER OO1 A
DISCHARGE NUMBER

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

UNITS 122 COOLS. TOWER BLWDN.

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

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

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BEAVER VALLEY POWER STATION

ADDRESSP. O. BOX 4

ATTN: DAVID DRNDORF

SHIPPINGFORT

LOCATION

PA 15077

DISCHARGE MONITORING REPORT (DMR) PACC25615

DAY

01

YEAR

01

FROM

MO

PERMIT NUMBER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

002 A DISCHARGE NUMBER

MONITORING PERIOD YEAR МО DAY 12 31 01 тоГ

Form Approved. OMB No. 2040-0004

MAJOR (SUBR 05) F - FIMAL

INTAKE SCREEN BACKWASH

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

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) BEAVER VALLEY POWER STATION

ADDRESS D. BOX 4

ATTN: DAVID ORNDORF FACILITY

LOCATION

PA 15077

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

PAC025615 PERMIT NUMBER

ann a DISCHARGE NUMBER

MAJOR

Form Approved. OMB No. 2040-0004

(SUBR 05) F - FINAL COS UNCONTAMINATED STORM WATER

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

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

NAME

BEAVER VALLEY POWER STATION

ADDRESS O. BOX 4

ATTN; DAVID ORNDORF

_ SHIPPIMGPORT

PA 15077

LOCATION

ATTN: KEVIN OSTROWSKI

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

MONITORING PERIOD

TO

DAY

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PA0025615 PERMIT NUMBER

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FROM

OO4 A DISCHARGE NUMBER

DAY

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MAJOR
(SUBR 05)
F - FINAL
UNIT ONE COOLG TOWER OVERFLOW

Form Approved. OMB No. 2040-0004

*** NO DISCHARGE IX | ***

NOTE: Read Instructions before completing this form.

TTM: KEVIN OSTROWSK		QUAN	ITITY OR LOADING	•	G	QUANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLI TYPE
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BEAVER VALLEY POWER STATION

ADDRESS C. BOX. 4

ATTN: DAVID ORNDORF

SHIPPIMEPORT

FACILITY LOCATION PA 15077

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

01

PA0025615 PERMIT NUMBER

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FROM

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12

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

AUX. INTAKE SCREEN BACKWASH MONITORING PERIOD YEAR МО DAY YEAR MO DAY

31

*** NO DISCHARGE | ***

NOTE: Read Instructions before completing this form.

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NAME BEAVER VALLEY POWER STATION

ADDRESS O. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGFORT

PA 15077

LOCATION

ATTN: KEVIN OSTROWSKI

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

MONITORING PERIOD

TO

YEAR

01

DAY

01

PACO25615 PERMIT NUMBER

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YEAR

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FROM

OO7 A
DISCHARGE NUMBER

MO DAY

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

AUX. INTAKE SYSTEM

*** NO DISCHARGE | 1 ***

NOTE: Read Instructions before completing this form.

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Joseph W. Venzon	to assur	d under my direction or so that qualified personnel ed. Based on my inquiry of persons directly respons	properly gather and evaluation the person or persons were	late the informativho manage the	tion system.	ald Along	: FOR DWV				
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

MONITORING FOR FLOW, FREE AVAILABLE CHLORINE, AND TOTAL RESIDUAL CHLORINE ARE REQUIRED ONLY DURING THOSE FERIODS OF DISCHARGE FROM THE ALTERNATE FLOW PATH OF THE REACTOR PLANT RIVER WATER SYSTEM:

BEAVER VALLEY POWER STATION

ADDRESSD DOX 4

ATTN: DAVID DRNDDRF

SHIPPINGPORT

ATTN: KEVIN OSTROWSKI

LOCATION

PA 15077

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

MONITORING PERIOD

TO 01

DAY

01

PA0025615 PERMIT NUMBER

MO

12

YEAR

01

FROM

COB A DISCHARGE NUMBER

DAY

31

YEAR MO

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

UNIT 1 COOLING TOWER PUMPHOUSE

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

QUANTITY OR LOADING QUANTITY OR CONCENTRATION NO. FREQUENCY SAMPLE **PARAMETER** EX TYPE **AVERAGE** MAXIMUM UNITS MINIMUM **ANALYSIS AVERAGE MAXIMUM** UNITS 714 长长长长长长 SAMPLE 表於安容於於 **** 12) 7.65 MEASUREMENT GRAC ററ്റേറ 0 0 **** PERMIT *** 5.0 **** TWICE/GRAB EFFLUENT GROSS VALUE REQUIREMENT 水水水水 MINIMUM MAXIMUM HONTH SOLIDS, TOTAL SAMPLE 长长长长长长 长轻长轻轻轻 *** 19) BUSPENDED MEASUREMENT SEKP bo530 1 0 0 **** PERMIT *** **** 30 OO TWICE/GRAD EFFLUENT GROSS VALUE REQUIREMENT 经保护书 MO AVG DAILY MX MG/L HONTH DIL & GREASE SAMPLE *** 经经验经验 25.0 15.0 15.0 **MEASUREMENT** SRKE 00556 0 PERMIT **** *** žΟ 30 /WICE/GRAD EFFLUENT GROSS VALUE REQUIREMENT *** MO AVG DAILY MX INST MAX MG/L MONTH IN CONDUIT OR SAMPLE 03) **** *** *** 40.001 20.001 THRU TREATMENT PLANT MEASUREMENT 50050 0 0 ĵ. REPORT REPORT PERMIT *** **** *** WEEKLYESTIMA EFFLUENT GROSS VALUE REQUIREMENT MO AVG DAILY MX *** SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I Certify under penalty of law that this document and all attachments were TELEPHONE prepared under my direction or supervision in accordance with a system designed DATE Joseph W. Venzon 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 Chemistry Manager submitted is , to the best of my knowledge and belief, true, accurate, and complete. SIGNATURE OR PRINCIPAL EXECUTIVE I am aware that there are significant penalties for submitting false information, TYPED OR PRINTED OFFICERIOR AUTHORIZED AGENT including the possibility of fine and imprisonment for knowing violations. COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

BEAVER VALLEY POWER STATION

ADDRESSO D. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT **FACILITY**

PA 15077

LOCATION

ATTN: KEVIN OSTROWSKI

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

PA0025615 PERMIT NUMBER

МО

12

DAY

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YEAR

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FROM

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

UNIT 2 COOLING WATER **MONITORING PERIOD** YEAR MO DAY TO 01 31 12

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

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04251 1 0 0 EFFLUENT GROSS VALUE R	PERMIT REQUIREMENT	各条条条条件	*******	4** 4****	******	MO AVG	O INST MAX	MG/L		HEN (
LOW, IN COMBUIT OR MICHAU TREATMENT PLANT M	SAMPLE IEASUREMENT	3.8	4.6	(03)	****	*****	****			47	MEAS
00000 1 0 0 FFLUENT GROSS VALUE R	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD .	******	经保持保存	******	*** ****	M)	EEKLYI	EASRI
HLORINE TOTAL M	SAMPLE IEASUREMENT	*****	****		****	0.0	0.0	(19)	0	1/7	GRAP
00060 1 0 0 Effluent gross value r	PERMIT REQUIREMENT	*****	特别特殊的特殊 有	*** ***	*****	0.5 MD AVG	1.25 ' INST MAX	MG/L	W	EEKLYO	RAB
HLORIME, FREE	SAMPLE MEASUREMENT	****	용용 등 등 등 등		****	0.0	0.0	(19)	0	1/7	GEAR
50064 1 0 0 EFFLUENT GROSS VALUE R	PERMIT REQUIREMENT	*******	经基本条件	**** ***	******	0.2 AVERAGE	0.5 MAXIMUM	MG/L	W	EEKLYO	RAB
M	SAMPLE MEASUREMENT						,	,			: .
n en	PERMIT REQUIREMENT										
м	SAMPLE IEASUREMENT						·				
A	PERMIT REQUIREMENT		W-1000				4				
NAME/TITLE PRINCIPAL EXECUTIVE OFFI		under penalty of law that d under my direction or s			esigned			TELEPHON	1E	D/	ATE
Joseph W. Venzon	to assur	re that qualified personnel	properly gather and evalu	uate the informa	tion `, ` (111 1-1	Committee				
•	or those	ed. Based on my inquiry a persons directly responsed is , to the best of my kr	or the person or persons v sible for gathering the infor	manage the rmation, the info	rmation 1000	19 Sollie	HOR JIM	1			1 50
Chemistry Manager	l am aw	rare that there are significa	ant penalties for submitting	a false information		TURE OF PRINCIPAL	EXECUTIVE 2	4,682-			71==
TYPED OR PRINTED COMMENTS AND EXPLANATION OF ANY	includin	ig the possibility of fine an	d imprisonment for knowle	ng violations.	OFF	ICER OR AUTHORIZE	D AGENT CO	A NUMBE	R	YEAR 1	fO DA

REPORT THE DAILY MAXIMUM FOR BETZ DT-1 WHEN DISCHARGING (24 HR. COMP.) :

MG/L. (THE LIMIT IS 35 M PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) BEAVER VALLEY POWER STATION ADDRESS O BOX 4

ATTN: DAVID ORNDORF FACILITY SHIPP INGPORT

LOCATION

PA 15077

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

PA0025615

PERMIT NUMBER

011_A

Form Approved. OMB No. 2040-0004

DISCHARGE NUMBER

(SUBR 05)

Control of the Contro

MAJOR

F - FINAL

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM 01 12 01 TO 01 12 31 *** NO DISCHARGE | | ***

DIESEL GEN & TURBINE DRAINS

ATTN: KEVIN OSTROW	3K I		FROM 01	12 0		12 31 **	* NO DISCH	ARGE I		***	
PARAMETER		QUAI	NTITY OR LOADING	3	Q	UANTITY OR CONC	NOTE: Read Instru CENTRATION	ictions befor		oleting this	
FLOW, IN COMBUIT OF		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE
THRU TREATMENT PLAN		0.004	0.004	(03)	水水水水水水	****	***			1/17	
D0050 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	REPORT MD AVG	REPORT DAILY MX	MGD	*****	******	**********	***	W	EKLYE	STIMA
	SAMPLE MEASUREMENT			rur <u>u</u> r				****			
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NAME/TITLE PRINCIPAL EXECUTIVE O	PERMIT REQUIREMENT										
Joseph W. Venzon	prepared u to assure t submitted	hat qualified personnel pr	s document and all attach ervision in accordance with operly gather and evaluate the person or persons who	h a system desig s the information	. 1. 1	1 2 1		ELEPHONE		DATE	
Chemistry Manager TYPED OR PRINTED	submitted I am aware	s , to the best of my know that there are significant	e for gathering the informa viedge and belief, true, acc penalties for submitting fal	tion, the informa curate, and comp	tion SIGNATUR	ROF PRINCIPAL EXE	FOR JNV	68Z-SI)	3 0	201	28
OMMENTS AND EXPLANATION OF A	NY VIOLATIONS (Refe	rence all attachmen	nts here)	noiations.	0102	A THORIZED A	GENT AREA CODE	NUMBER	YE	AR MO	DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) BEAVER VALLEY POWER STATION ADDRESS 0. BOX 4 ATTN: DAVID DRNDORF SHIPPINGPORT

LOCATION

ATTM: KEVIN OSTROWSKI

PA 15077

PA0025615 PERMIT NUMBER

FROM

Oi2 A DISCHARGE NUMBER

Form Approved. OMB No. 2040-0004

MAJOR (SUBR 05)

F - FINAL

BLOWDOWN FROM THE HVAC UNIT

MONITORING PERIOD YEAR MO DAY YEAR MO DAY 01 12 C1 01 12 31

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

*** NO DISCHARGE

The state of the s			17177 A				NOTE: Read Instru	actions befor	e com	pleting this	form.
PARAMETER		QUA	NTITY OR LOADING	3 	G	QUANTITY OR CON	CENTRATION		NO.	FREQUENCY	
Н		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYP
	SAMPLE MEASUREMENT	***	****		8.88	****	8.88	(12)		1/31	00
0400 1 0 0 FFLUENT GROSS VALUE	PERMIT	非条件条件	经 经保存款款款	***	5. 0	经保存收收帐	7.0			VCE/ G	G2/
FFLUENT GROSS VALUE LOW, IN CONDUIT OR				***	MINIMUM			s υ		TONTH	nra.
HRU TREATMENT PLANT	SAMPLE MEASUREMENT	20.001	10.001	(03)	安安安安安	***	****			1/31	F
0 0 1 0 0 0	PERMIT	REPORT	REPORT		计算计算计算	计计计计计计	* ******	***	: TH	VCE/ E	
FLUENT GROSS VALUE		MO AVG	DAILY MX	4GD				[10MTH	2111
	SAMPLE MEASUREMENT			,					1	15.314 1 5 1	
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	MEASUREMENT					<u> </u>				`. .	
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT	,									
	PERMIT REQUIREMENT										•
NAME/TITLE PRINCIPAL EXECUTIVE OF	FICER I Certify u	inder penalty of law that the	nis document and all attac	hments were				FL EDUO:			
Joseph W. Venzon			pervision in accordance wi properly gather and evalua			100	<i>y</i>	ELEPHONE		DAT	<u> </u>
Chemistry Manager	Submitted	3. Based on my inquiry of	the person or persons wh	o manage the s	ystem,	datalena	BEJW.				
TYPED OR PRINTED	l am awar	i is , to the best of my kno e that there are significan	wiedge and belief, true, ac	curate, and con	npiete. SIGNATI	URE OF PRINCIPAL E	XECUTIVE 724	168Z-SI	13/	12/01	28
MMENTS AND EXPLANATION OF AN	Including	the possibility of fine and	imprisonment for knowing	violations.	OFFIC	ER OR AUTHORIZED	AGENT AREA CODE	NUMBER		EAR MO	

BEAVER VALLEY FOWER STATION

ADDRESS: O. BOX 4

ATTN: DAVID GRNDORF

FACILITY

PA 15077

LOCATION

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

PA0025615 PERMIT NUMBER

DISCHARGE NUMBER

MAJOR (SUBR OS) F - FINAL OUTFALL 013 Form Approved. OMB No. 2040-0004

MONITORING PERIOD YEAR MO YEAR MO DAY DAY FROM Ol 12 CI то 01 12 31

*** NO DISCHARGE | | ***

ATTN: KEVIN DSTROWSK	Ι :	· ·	FROM UI	15 0	1 то 01	12 31 **	→ NO DISCH NOTE: Read Instru	IARGE I	e com	### pletina this	form.
PARAMETER		QUA	NTITY OR LOADING	3	G	QUANTITY OR CON			.,	FREQUENCY	SAMPLE
PH		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		OF ANALYSIS	TYPE
,	SAMPLE MEASUREMENT	****	****		6.54	***	7.34	(12)	0	1/7	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	**** ****	6.0 MINIMUM	经保存条件条	9. O	su	W	EEKLYG	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.019	0.030	(03)	***	****	*****	30		1/7	Est
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	rigo	착각작작산학	经补收收收	****	***	Wi	EEKLYE	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	*****		存换格特特特	0.33	0.51	19)		2/31	CALC
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	· 安静水水杨林 · 次	*** ****	经本条款条款	REPORT MD AVG	REPORT INST MAX I	1G/L	T	VICE/C	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT					ala i					
<u> </u>	SAMPLE MEASUREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OF	PERMIT REQUIREMENT	1									
Joseph W. Venzon	prepared to assure submitted or those	under my direction or su that qualified personnel d. Based on my inquiry o persons directly responsi	his document and all attac pervision in accordance w properly gather and evalua if the person or persons wh ble for gathering the inform	rith a system des ate the information no manage the s	on system,	d Hallona	FORJAV	TELEPHONE		DAT	E
Chemistry Manager Typed on Printed COMMENTS AND EXPLANATION OF ANY	I am awa	re that there are significant the possibility of fine and	owledge and belief, true, and penalties for submitting the limprisonment for knowledge.	ccurate, and cor	mplete. SIGNAT	URE OF PRINCIPAL E	XECUTIVE 24	1682-5		VEAR MC	1 28 DAY

ANY VIOLATIONS (Reference all attachments here)

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

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

ATTN: DAVID DRNDORF SHIPPINGPORT

PA 15077

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

PA0025615 PERMIT NUMBER

YEAR

013 B DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL

Form Approved. OMB No. 2040-0004

OUTFALL 013 MONITORING PERIOD MO DAY YEAR MO DAY 10 UL

ATTM: KEVIM OSTRO	Maki	100	FROM UI	10 0	TO 01	12 31 *-	** NO DIS	CHARGE	11	计分子	
PARAMETER		QUA	ITITY OR LOADING			QUANTITY OR CON	NOTE: Read Ins	tructions befo	re com	pleting this	
YANIDE, WEAK ACTI		AVERAGE	MAXIMUM	UNITS	MINIMUM				NO.	OF	TYF
PISSOCIABLE	SAMPLE MEASUREMENT	****	非法法法法法		****	AVERAGE	MAXIMUM	UNITS	<u> </u>	ANALYSIS	1
0718 1 0 0		*****	*****	***	****	40.05	60.05	1,77		3/92	GLA
FFLUENT GROSS VAL YANIDE, TOTAL		*****		****	оллани	REPORT GRTR AVG	REPORT DAILY MX	MG/L		MTCF (CRAB
(AS CN) 0720 1 0 0	SAMPLE MEASUREMENT	· · ·	****		本本本本本本			(17)		3TRLY	
FFLUENT GROSS VAL	PERMIT. UE REQUIREMENT	****	计标识计划 化	***	计计计计计计	LO.OS REPORT	LO.OS REPORT				GRAH
NTIMUNY, TUTAL (AS SB)	SAMPLE	****	***	****	*******	ORTR AVG	DAILY MX	MG/L		WICE (STRLY	RAB
1097 1 0 0	MEASUREMENT PERMIT	****				0.002	0.004	(19)		2/92	
FFLUENT GROSS VAL	UE REQUIREMENT		****	***	********	REPORT ORTH AVG	REPORT				GER
	SAMPLE MEASUREMENT					HILLIN MVG	DAILY MX	MG/L		TRLY	
	PERMIT										
	REQUIREMENT										
$\frac{1}{2} \left(\frac{1}{2} \right)^{-1} = \frac{1}{2} \left(1$	MEASUREMENT										
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:	SAMPLE MEASUREMENT										
	PERMIT										1.3
	REQUIREMENT										
	SAMPLE MEASUREMENT	. '* 									
	PERMIT REQUIREMENT										
AME/TITLE PRINCIPAL EXECUTIVE	OFFICER Certify unde	r penalty of law that this	document and all attachm	nents were							77
Joseph W. Venzon	to assure that	qualified personnel pro	perly gather and evaluate	a system designe the information	1) /	11.1.4		TELEPHONE		DATE	=
Chemistry Manager	or those person	ons directly responsible	for gathering the informati	manage the syste on, the informatic			DRJWV			,	
TYPED OR PRINTED MENTS AND EXPLANATION OF A	I am aware the including the	at there are significant possibility of fine and im	edge and bellef, true, accu enalties for submitting fals prisonment for knowing vi	e information, olations,		R OR AUTHORIZED A	ECUTIVE 2	682-SI	3 0	201	28
	WITH VIOLATIONS (Refere	nce all attachment	s here)			U	AGENT AREA CODE	NUMBER	YE	AR MO	DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) BEAVER VALLEY POWER STATION

ADDRESSP. D. BOX 4

ATTN: DAVID DRMDORE

SHIPPINGPORT

PA 15077

LOCATION

ATTN: KEVIN OSTROWSKI

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

TOUL

PA0025615 PERMIT NUMBER

YEAR MO DAY

15 01

FROM

DISCHARGE NUMBER

12

MAJOR (SUBR O5) Form Approved. OMB No. 2040-0004

F - FINAL 101 CHEMICAL WASTE TREATMENT MONITORING PERIOD YEAR DAY

31

*** NO DISCHARGE | ***

		7					NOTE: Read Instru	uctions befor	e com	oleting this	form
PARAMETER		QUA	NTITY OR LOADING	ì		QUANTITY OR CON	CENTRATION			FREQUENCY	
PH		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE
	SAMPLE MEASUREMENT	***	****		6.96	****	7.55	(12)	~	1/-	Care
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	****	***	6.0 MINIMUM	*****	7. O			// EEKLYG	GLAE
SUSPENDED	SAMPLE MEASUREMENT	***	****		*****	5.5	MAXIMUM	(19)		17.	ZHR
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT	****	[9]	 ***	*******	30	10.0		0	17 Eklyo	COMP
OIL & GREASE	SAMPLE MEASUREMENT	****	***	**	****	MD AVG	DAILY MX	MG/L (19)			
00556 1 0 0 EFFLUENT GROSS VALUE		****	****		*****	45.0	∠S.0 20		0	Y7 EKLYG	CEAR
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE	****	****	经按按	*****	MO AVG	DAILY MX	MG/L (19)		.A.F\L. 1 G	
00610 1 0 0	MEASUREMENT PERMIT	****	*****	\$ # #	***	REPORT	REPORT	177		*	*
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR	CAMPLE	A 4		****	***	MO AV9 *****	DAILY MX	MG/L	WE	EKLYG	RAF
THRU TREATMENT PLANT 50050 1 0 0	DENLUM	0.602 REFORT	O.014 REPORT		***		***		1	DAILY	SONT
EFFLUENT GROSS VALUE HYDRAZINE	REQUIREMENT SAMPLE	MO AVG		1GD		****	****	**** ****	DA	TLY C	INTIN
81313 1 0 0 	MEASUREMENT	*****			***	*	*	(19)		*	*
EFFLUENT GROSS VALUE	REQUIREMENT			**************************************	格拉拉拉拉格	REPORT MO AVO	REPORT DAILY MX	16/L	WE	EKLYGF	AB
	SAMPLE MEASUREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OF	PERMIT REQUIREMENT										
Joseph W. Venzon	prepared to assure	that qualified perconnol n	nis document and all attachi pervision in accordance with roperly gather and evaluate	n a system desi				ELEPHONE		DATE	
Chemistry Manager	or those p	persons directly responsib	the person or persons who le for gathering the information	manage the sy tion, the inform	stem, ation		acout 30	100 -	_		
TYPED OR PRINTED OMMENTS AND EXPLANATION OF ANY		- mac anoro and organical	Perignues for submitting fal		1 0.0.14	URE OF PRINCIPAL EX ER OR AUTHORIZED	AGENT AREA CODE	682-511 NUMBER		2 OL	28 DAY

HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP.

* NOT IN WET LAY-UP CONDITIONS IN DECEMBER 2001.

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

NAME BEAVER VALLEY POWER STATION

ADDRESSP 0. BOX 4

ATTN: DAVID ORNDORF SHIPPINGPORT

PA 15077

LOCATION

ATTN: KEVIN OSTROWSKI

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

MONITORING PERIOD

TO CI

DAY

Q1

PAOO25615 PERMIT NUMBER

12

YEAR MO

Q1

FROM

102 A DISCHARGE NUMBER

31

YEAR MO DAY

12

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

*** NO DISCHARGE | | ***

102 INTAKE SCREENHOUSE

NOTE: Read Instructions before completing this form

		QUAI	NTITY OR LOADING		NOTE: Read instructions before completing this form.						
PARAMETER			T TON ZOADING	, ,		QUANTITY OR CON	CENTRATION		NO.	FREQUENCY	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE
.'	SAMPLE MEASUREMENT	******	体格特殊特殊		7.64	*****	770	(12)	 	2/	
70400 1 0 0	PERMIT.	计计计算计算	*****	***	6.0		7.78		0	2/31	GEAR
FFLUENT GROSS VALUE FOLIDS, TOTAL				***	MINIMUM	****	P.O MAXIMUM	su		WICE/G	RAB
SUSPENDED	SAMPLE MEASUREMENT	****	*****		****	1 /		(19)		MONTH	
0530 1 0 0		计分类符号令	计分类分类 奔	***		4.6	4.9		0	2/31	GEAG
FFLUENT GROSS VALUE	REQUIREMENT			거 거 거 첫 첫 첫 첫 첫	****	30 MD AVG	100			WICE/G	
re a sucuse	SAMPLE	*****	****		****		DAILY MX	MG/L		MONTH	
0556 1 0 0	MEASUREMENT	******		- 64 1		ZS.0	LS.0	\ 1 77	0	2/3(GENE
FFLUENT GROSS VALUE	PERMIT REQUIREMENT		*************************************	*** ****	****		20		T	MICE	
LUW, IN CONDUIT TH		12 001		(03)	****	MD AVG		MG/L		HTMON	
HRU TREATMENT PLANT		LD.001	20.001				******			2/31	\mathcal{I}
FFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MD AVG	REPORT DAILY MX	J	*****	计算特殊符件	*****	***	TL	VICE/E	EST
	SAMPLE		THILL 13X	1GD				***		IDNTH	
	MEASUREMENT										
	PERMIT REQUIREMENT	1.1							· .		
	SAMPLE										
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,	PERMIT						,	 			
	REQUIREMENT SAMPLE										
	MEASUREMENT										
	PERMIT						·				1. *.
NAME/TITLE PRINCIPAL EXECUTIVE OF	REQUIREMENT	<u></u>		-							
Joseph W. Venzon	prepared t		s document and all attachrevision in accordance with		gned n			ELEPHONE	+	DATE	
Chemistry Manager	submitted, or those pe	Based on my inquiry of t	he person or persons who	manage the sy	stem,	Adolesa -	. /				
TYPED OR PRINTED	submitted I am aware	is , to the best of my know	viedge and belief, true, acc	tion, the informa curate, and comp	ition (CANIA)	REOF PRINCIPAL EX	CRJWV 724	1 m_c1	12/	02 01	28
MENTS AND EXPLANATION OF ANY	t 1 11 11	with more and organical it	be ignies for submitting tal	se information, iolations.	I OIGHMIG	ER OR AUTHORIZED	AGENT AREA CODE	NUMBER	10		
	Hele	эгынсө ан апасптөп	its nere)				I CODE	HOWBER		EAR MO	DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) BEAVER VALLEY POWER STATION

ADDRESSP. D. BOX 4

LOCATION

ATTW: DAVID ORNDORF

SHIPPINGPORT **FACILITY**

PA 15077

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

PA0025615 PERMIT NUMBER

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

MAJOR (SUBR 05) F - FINAL

SLUDGE SETTLING BASIN

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM 01 12! OI TO UI IZ 31 *** NO DISCHARGE | | ***

ATTN: KEVIN OSTROWS	4.I	· * :*	FROM 01	IE C	TO UI	MO DAY	** NO DISC	HARGE	1	***	
PARAMETER		QUAI	NTITY OR LOADING	1		QUANTITY OR CON	NOTE: Read Instr CENTRATION	uctions before	NO.	pleting this	
PH		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE
00400 1 0 0	SAMPLE MEASUREMENT	***	****		7.62	***	7.68	(12)		21-,	/_
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	*****	***	<u>6. 0</u>	****	7.0			4/31 WICE/0	GRAGE FAR
SUSPENDED	SAMPLE MEASUREMENT	****	****		MINIMUM	9,3	MAXIMUM	5U (19)		MONTH	24-H
00530 1 0 0 FFLUENT GROSS VALUE LOW: IN COMMUTT OF	PERMIT REQUIREMENT	**************************************	*****	***	***	30	100		9	4/31 VICE/0	COMP
LOW, IN COMDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.045	0.267	(03)	***	MO AVG	DAILY MX	MG/L		31/31	_
FFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT	46D	****	特殊格殊格	* ***	1		VICE/E	EST STIM,
	SAMPLE MEASUREMENT							***		HTMOP	
	PERMIT REQUIREMENT	1374									
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
N	SAMPLE MEASUREMENT										
NAME/TITLE DRIVE	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFF Joseph W. Venzon Chemistry Manager	prepared u to assure the submitted, or those pe	hat qualified personnel pro Based on my inquiry of the ersons directly responsible	s document and all attachr prvision in accordance with operly gather and evaluate the person or persons who a for gathering the informat	n a system design the information тападе the sys	stem,	Italera F	OR IN	ELEPHONE		DATE	
TYPED OR PRINTED MMENTS AND EXPLANATION OF ANY	l am aware	that there are significant	neage and pellet, true, acc penalties for submitting fal-	urate, and com	SIGNATU	RE OF PRINCIPAL EX ER OR AUTHORIZED	ECUTIVE 724	682-51 NUMBER	-	Z O	28 DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME BEAVER VALLEY POWER STATION ADDRESSP D. BOX 4 ATTN: DAVID ORNDORF SHIFFINGFORT PA 15077

FACILITY

LOCATION

ATTN: KEVIN OSTROWSKI

PERMIT NUMBER

PA0025615

110 A DISCHARGE NUMBER

Form Approved. OMB No. 2040-0004

MAJOR (SUBR 05) F - FINAL UNIT 2 SERVICE WATER BACKWASH

MONITORING PERIOD YEAR MO DAY YEAR MO DAY OI. 1 42 TO CI FROM UI 12 31

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

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

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	prepared	under my direction of sur	nis document and all attac pervision in accordance w	ith a evetom doci	igned		Ţ	ELEPHONE		 DAT	E
Joseph W. Venzon	Submitted	i triat qualified personnel p d. Based on my inculty of	properly gather and evalua	ite the information	n 11	N I 1	- 21/				
Chemistry Manager	submitted	persons directly responsib is , to the best of my kno	ole for gathering the inform wiedge and belief, true, a	nation, the inform	nation (1)		DUV 774	100		MAIN	20
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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) BEAVER VALLEY POWER STATION

ADDRESSP D. BOX 4

ATTN: DAVID ORNOORF

SHIPPINGPORT

PA 15077

LOCATION

ATTN: KEVIN OSTROWSKI

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

MONITORING PERIOD

DAY

15 51

PAC025615 PERMIT NUMBER

D1

FROM

111 A DISCHARGE NUMBER

12

YEAR MO

OI

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

F - FINAL 111 DIESEL GENERATUR BLDG

DAY 31

*** NO DISCHARGE | | ***

		QUANTITY OR LOADING					NOTE: Read Instr	uctions befor	e com	pleting this	form.
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NAME/TITLE PRINCIPAL EXECUTIVE OFF	FICER Certify to	nder penalty of law that th	ils document and all attachn	nents were			16.0				
Joseph W. Venzon	to assure	that qualified perconnel s	pervision in accordance with	a system desig	ned	N 1 1	<u>}</u> -1	ELEPHONE		DATE	
Chemistry Manager	or those p	ersons directly responsible	the person or persons who le for gathering the informat	manage the sys ion, the informa	item,	al todalero	FOR JUST _	1	.		
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* DISCHARGE OCCUP	KEN IN	ONLY S	WEEKS ()	1 DEC	EWBER 2	3001					

BEAVER VALLEY FOWER STATION

ADDRESSP. O. BOX 4

ATTN: DAVID ORNDORF

SHIPPIMGPORT

PA 15077

FACILITY LOCATION

ATTN: KEVIN OSTROWSKI

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

PACC25615 PERMIT NUMBER 113 A DISCHARGE NUMBER

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

UNIT 2 SEWAGE TMT PLANT

*** NO DISCHARGE | | ***

NOTE: Read Instructions before completing this form.

		QUAN	ITITY OR LOADING	ì	G	QUANTITY OR CON	CENTRATION	*	NO. EX	FREQUENCY OF	SAMPLE TYPE
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NAME/TITLE PRINCIPAL EXECUTIVE OF	prepar	y under penalty of law that ed under my direction or si	upervision in accordance v	with a system d	esigned			TELEPHON	E	DA	ATE
Joseph W. Venzon	submit	re that qualified personnel ted. Based on my inquiry o	of the person or persons w	vho manage the	system,	MANION	FORTHY				
Chemistry Manager	submit	e persons directly respons ted is , to the best of my kr	nowledge and belief, true,	accurate, and c	omplete. SIGNA	TURE OF PRINCIPAL	EXECUTIVE (24		5113	02/0	1 28
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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) BEAVER VALLEY POWER STATION ADDRESSP. C. BOX 4

ATTN: DAVID ORNDORF

ATTN: KEVIN OSTROWSKI

SHIPPINGPORT

LOCATION

PA 15077

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

PA0025615 PERMIT NUMBER

201 A DISCHARGE NUMBER

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

MONITORING PERIOD YEAR МО DAY YEAR MO DAY O1 FROM [15 01 01 тоГ 12

201 SOFTENER REGENERANTS

*** NO DISCHARGE | ***

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Joseph W. Venzon	prepared u	der penalty of law that this nder my direction or supe	document and all attach	ments were	gned .	_		ELEPHONE	+	DATE	
Chemistry Manager	submitted.	Based on my inquiry of the	ne person or persons who	the information manage the sy	stern,	1 Jaloue C	/		+	DATE	\top
TYPED OR PRINTED	I am aware	that there are significant p	edge and belief, true, acc	curate, and com	plete. SIGNATU	REOF PRINCIPAL EX	ECUTIVE 724	682-511	2/	2/1	0
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BEAVER VALLEY POWER STATION

ADDRESSP O. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

PA 15077

LOCATION

ATTN: KEVIN OSTROWSKI

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

MONITORING PERIOD

PA0025615 PERMIT NUMBER

FROM

MO DAY

203 A DISCHARGE NUMBER

YEAR MO DAY

MAJOR

Form Approved. OMB No. 2040-0004

(SUBR 05) F - FINAL

MAIN SEWAGE TMT PLANT

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	PERMIT REQUIREMENT										
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Joseph W. Venzon	Submitted	Based on my insuring of	openy gather and evaluate	the information	, 1, 1	1111	_ ^	ELEPHONE	-	DAT	E
Chemistry Manager	submitted I am awar	is , to the best of my know	e for gathering the informatividedge and belief, true, acc	tion, the information and com	ation plete.	JE PENCIPAL EX	x In	(B)	ر احا	12 121	70
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ADDRESSP O. BOX 4

DISCHARGE MUNITORING REPORT (DMR)

Form Approved. OMB No. 2040-0004

ATTN: DAVID DRNDORF FACILITY SHIPPINGPORT

PA 15077

PA0025615 PERMIT NUMBER

DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL

211 TURBINE BLDG

ATTN: KEVIN OSTROWSKI

LOCATION

MONITORING PERIOD YEAR MO DAY YEAR MO DAY Oi FROM 12 01 TO 01 12 31

*** NO DISCHARGE | | ***

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PARAMETER	\rightarrow		T	я Т	9	QUANTITY OR CON	CENTRATION		NO.	FREQUENC	SAMPLE
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00556 1 0 0 h	MEASUREMENT	***			25.0	25.0	45.0	(19)	0	1/17	<u> </u>
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICE	EQUIREMENT DER Certify un	ider penalty of law that this	document and all attachr								
Joseph W. Venzon	prepared u to assure t	hat qualified personnel or	irvision in accordance with	a system desig	ned		T	ELEPHONE		DATE	
Chemistry Manager	or those pe	ersons directly responsible	to person or persons who	manage the sys	stem,	Atalen 5	JNV				T
TYPED OR PRINTED	l am aware	that there are significant t	onalties for submitting fall	urate, and comp	SIGNATUI	BEOF PRINCIPAL EV	ECUTIVE 77A	1682-511	3/	0 1	20
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BEAVER VALLEY POWER STATION

ADDRESSP. O. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

PA 15077

FACILITY LOCATION

ATTN: KEVIN OSTROWSKI

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

PA0025615 PERMIT NUMBER

213 A DISCHARGE NUMBER MAJOR (SUBR O5)

F - FINAL

UNIT 2 COOL TOWER PUMPHOUSE

Form Approved.

OMB No. 2040-0004

MONITORING PERIOD YEAR MO YEAR МО DAY DAY 1 2 31 VI. 12 TI T U. FROM

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

DADAMETED		QUAN	ITITY OR LOADING	à	٥ - ١	QUANTITY OR CON	CENTRATION		NO.	FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
PH	SAMPLE MEASUREMENT	***	****			****		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	5.0 MINIMUM	*****	7.0 MAXIMUM	5U	T	WICE/	RAB
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NAME/TITLE PRINCIPAL EXECUTIVE O		y under penalty of law that ed under my direction or s			esigned	•		TELEPHON	1E	D/	ATE
Joseph W. Venzon	to assu	ire that qualified personnel ted. Based on my inquiry	properly gather and evaluation of the person or persons were the person or persons were the	uate the informa	ation	11-Anlana	Con 00 1/				
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COMMENTS AND EXPLANATION OF A	NY VIOLATIONS <i>(F</i>	Reference all attachm	ents here)	* *	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	$\mathbf{\mathcal{I}}$		•			

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

ATTN: DAVID ORNDORF SHIPPINGPORT

PA 15077

FACILITY LOCATION

ATTM: KEVIN OSTROWSKI

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

MONITORING PERIOD

тоГ

YEAR

01

DAY

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PAOO25615 PERMIT NUMBER

12

YEAR

O)

FROM [

301 A DISCHARGE NUMBER

DAY

31

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15

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

*** NO DISCHARGE | ***

NOTE: Read instructions before completing this form

UNIT 2 AUX BOILER BLOWDOWN

ATTM: KEVIN OSTROWSK	LΙ	* 184	OHANTITY OF LOADING							before completing this form.		
DADAMETED		QUAN	ITITY OR LOADING	:	G	NUANTITY OR CON	CENTRATION		NO. EX	FREQUENCY OF	SAMPLE	
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS		
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0530 1 0 0		****	经未补款帐款	***	****	30	100		**	WICE/	HAR	
FLUENT GROSS VALUE	PERMIT. REQUIREMENT			****		MO AVG	DAILY M	IX MG/L		MONTH	,	
L & GREASE	SAMPLE MEASUREMENT	****	****		***	<u> </u>		(17)				
556 1 0 0	PERMIT	****	****	***	*****	15	20		1	WICE/	RAB	
FLUENT GROSS VALUE	REQUIREMENT			***		MO AVG	DAILY M	IX MG/L		HTMOM		
OW, IN COMBUIT OR RU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	****	*****	****	*				
050 1 0 0	PERMIT	REPORT	REPORT		****	***	****	****	W	EEKLY	STIM	
TLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MX	MGD				***				
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	PERMIT REQUIREMENT						No.					
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NAME/TITLE PRINCIPAL EXECUTIVE O		under penalty of law that			ianad			TELEPHO	٧E	D/	ATE	
Joseph W. Venzon	to assu submitt	ed under my direction or so re that qualified personnel ed. Based on my inquiry	properly gather and evalu of the person or persons v	ate the information	on cystem,	Marila	VACOLTHY					
Chemistry Manager	submitt	e persons directly responsed is , to the best of my kr	lowledge and belief, true,	accurate, and cor	nplete. SIGNA	TURE OF PRINCIPAL		724,682-5	113	02 C	3 28	
TYPED OR PRINTED	lam aw	vare that there are significating the possibility of fine an	int penalties for submitting	ı false information		ICER OF AUTHORIZ	ED AGENT	AREA NUMBE			10 DAY	
MMENTS AND EXPLANATION OF A				-				 		· · · · · · · · · · · · · · · · · · ·		

BEAVER VALLEY POWER STATION

ADDRESSP. G. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

PA 15077

FACILITY LOCATION

ATTN: KEVIN OSTROWSKI

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

MONITORING PERIOD

TO

DAY

OI

PAOO25615 PERMIT NUMBER

12

YEAR MO

V1

FROM

303 A DISCHARGE NUMBER

DAY

31

YEAR MO

UI

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

UNIT 1 OIL WATER SEPARATOR

*** NO DISCHARGE | ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUAN	QUANTITY OR LOADING		QUANTITY OR CONCENTRATION				NO.	FREQUENC	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
PH	SAMPLE MEASUREMENT	****	****		7.28	****	7,47	(12)	0	1/7	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****		*** ****	5.0 MINIMUM	****	7.0 MAXIMUM	ΒU	W	EEKLY	CRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	****		****	4.7	6.5	(17)	0	47	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	李林林林林	林 芬特为海林 为	**** ***	****	MO AVG	100 DAILY MX	MG/L	W	EEKLY	GRAB
OIL & GREASE	SAMPLE MEASUREMENT	********	*****		*****	Z5.0	LS.0	(19)	0	47	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	长楼楼楼林林	· 特种特殊特殊。	***	*******	MO AVG	20 DAILY MX	MG/L	W	EĖKLY	GRAB
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50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*******	*******	非本宗宗宗	****	W	EEKLY	ESTIMA
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•	PERMIT REQUIREMENT			§.							
	SAMPLE MEASUREMENT			·							
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	SAMPLE MEASUREMENT					:					
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OF	prepare	under penalty of law that t d under my direction or su	pervision in accordance w	vith a system de	signed			TELEPHON	E	D.	ATE
Joseph W. Venzon Chemistry Manager	submitt or those submitt	re that qualified personnel ed. Based on my inquiry of persons directly responsi ed is , to the best of my kni	f the person or persons w ble for gathering the inform owledge and belief, true, a	ho manage the nation, the infor	system, mation		or Jul	24682-5	เปล	02 0	1 29
TYPED OR PRINTED	lam aw	are that there are significang the possibility of fine and	nt penalties for submitting	false informatio	, SIGNA	TURE OF PRINCIPAL I	AGENT AF	EA NUMBE			10 DAY

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. O. BOX 4

ATTN: DAVID GRNDORF

SHIPPINGPORT

PA 15077

FACILITY LOCATION

ATTM: KEVIN OSTROWSKI

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

PAQ025615 PERMIT NUMBER

BIB A DISCHARGE NUMBER

MAJOR (SUBR 05) F - FINAL

Form Approved. OMB No. 2040-0004

MONITORING PERIOD YEAR MO DAY YEAR MO DAY 01 FROM O1 Ol 12 31 313 TURBINE BLDG DRAIN

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

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i i	_	QUAN	ITITY OR LOADING		NOTE: Head Instructions before QUANTITY OR CONCENTRATION							
PARAMETER	\rightarrow		,		GOANTITY ON CONCENTRATION					FREQUENCY OF	SAMPLI	
PH	\leq	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	'''-	
	SAMPLE MEASUREMENT	*******	****		7.20	***	7.3A	(12)	0	1/7	GEAB	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 Minimum	*****	7. O MAXIMUM	SU	<u> </u>	EEKLY		
	SAMPLE MEASUREMENT	****	*******		****	6.0	[2.]	(19)	9	1/17	GRAB	
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OIL & GREASE	SAMPLE MEASUREMENT	******	****		****	45.0	25.0	(17)		47	GLAB	
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N	SAMPLE MEASUREMENT		,								,	
	PERMIT REQUIREMENT	3										
NAME/TITLE PRINCIPAL EXECUTIVE OFF	ICER Certify u	under penalty of law that the under my direction or sur	nis document and all attacl	hments were	laned		T	TELEPHONE		DA1	re	
Joseph W. Venzon	submitte	o that qualified personnel p d. Based on my inquiry of	roperly gather and evaluate the person or nersons when	ite the information	on I	IN DO				1		
Chemistry Manager	submitted	persons airectly responsib d is , to the best of my kno	le for gathering the inform	ation, the inform	nation (1)	MACOUNT	COCINV	4,682:5	12	A7 101	70	
TYPED OR PRINTED OMMENTS AND EXPLANATION OF ANY	i am awa	ire that there are significant	penalties for submitting fa	alea information	JUNAI	URÉ OF PRINCIPAL E CER OR AUTHORIZED	AGENT ARE	NUMBER		02 (1) YEAR MO	28 D DAY	

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

ATTN: DAVID ORNDORF SHIPPINGFORT

PA 15077

FACILITY LOCATION

ATTN: KEVIN Deronwort

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

MONITORING PERIOD

PA0025615 PERMIT NUMBER

YEAR MO DAY

FROM

401 A DISCHARGE NUMBER

YEAR MO DAY

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

01 12 01 TO 01 12 31 *** NO DISCHARGE | | ***

CHEM. FEED AREA OF AUX BOILERS

ATTN: KEVIN OSTROWSKI				-100 01	12 31 44	NOTE: Read Instru	ictions befor	e com	nleting this	form
PARAMETER	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION					FREQUENC	SAMPL
PH	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE
SAMPLE MEASUREMENT	******	长衫长长长长		8.43	***	8.44	(12)		2/31	GRAF
EFFLUENT GROSS VALUE REQUIREMENT	*****	6.	*** ***	A.O MINIMUM	****	REPORT			WICE/	
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OIL & GREASE SAMPLE MEASUREMENT	***	****	***	***	MO AVG		MG/L (19)		MONTH	
00556 1 0 0 PEDMIT	****	*****	###	*****	ムS.0 15	Z5.0 20			2/31 AICE/0	Gene
FLOW, IN CONDUIT OR CAMPIE			**** (03)	****	MO AVG		MG/L		MONTH	mmu.
THRU TREATMENT PLANT MEASUREMENT 50050 1 0 0 PERMIT	PEPINT	LO.OOL		***					1/7	Est
EFFLUENT GROSS VALUE REQUIREMENT SAMPLE	MD AVG		1GD		****	特特特特特格 格	*** ***	W	EEKLYE	STIM?
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SAMPLE MEASUREMENT										
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Certify	under penalty of law that the	nis document and all attach	ments were				ELEPHONE			
Chemistry Magazes	ad under my direction or sur re that qualified personnel p ed. Based on my inquiry of p persons directly responsib	roperly gather and evaluate the person or persons who	e the information o manage the sy	rstern,	Idolera	FOX JMV	LLEFHONE		DAT	<u> </u>
TVDED OR BRINTED am aw	rare that there are significant	wiedge and belief, true, ac penalties for submitting fa	curate, and com	plete. SIGNATU	RE OF PRINCIPAL EX	RECUTIVE 724 AREA CODE	1687-51 NUMBER		O2 OI YEAR MO	

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

DAY

01

MONITORING PERIOD

TO

Form Approved. OMB No. 2040-0004

BEAVER VALLEY POWER STATION ADDRESS- O. BOX 4

ATTM; DAVID ORNDORF

FACILITY SHIPPINGPORT

PA 15077

PA0025615 PERMIT NUMBER

12

YEAR MO

01

FROM

403 A DISCHARGE NUMBER

YEAR MO

12

01

DAY

31

(SUBR 05) F - FINAL

MAJOR

CONDENSATE BLOWDOWN & RIVR WAT

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

LOCATION ATTN: KEVIN DSTROWSKI

D'A D A A 4 ET E D		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION					FREQUENCY OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	Ī.,	ANALYSIS	:
² }-1	SAMPLE MEASUREMENT	***	格格格格格格			****		(12)			
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BIL & GREASE	SAMPLE MEASUREMENT	****	***		***			(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	******	*** ****	*****	MD AVE	PO DAILY MX	MG/L	W	EEKLYG	RAB
VITROGEN. AMMONIA FOTAL (AS N)	SAMPLE MEASUREMENT	***	***		***		,	19)	:		
00610 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	****	*** ***	****	REPORT MO AVO	REPORT DAILY MX	MG/L	W	EEKLYG	RAB
CLAMTROL CT-1, TOTAL WATER	SAMPLE MEASUREMENT	***	格格格格格格		***			19)			
04251 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	各种格特特	*****	*** ***	长铃袄条捺 菸 1	O MD AVG	DAILY MX	MG/L	100000000000000000000000000000000000000	HEN C DISCHR	F 4000000000000000000000000000000000000
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CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	***	格林林林林		**			19)			
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name/title principal executive of Joseph W. Venzon Chemistry Manager Typed on printed	prepare to assu submit or thos submit I am av includir	under penalty of law that ad under my direction or si re that qualified personnel ted. Based on my inquiry e persons directly respons ted is , to the best of my kr ware that there are significa ng the possibility of fine an	upervision in accordance properly gather and evaluation of the person or persons vibile for gathering the informowledge and belief, true, and penalities for submitting d imprisonment for knowle	with a system duate the informa who manage the mation, the info accurate, and co gralse informati	tion e system, rmation complete. SIGNA	TURE OF PRINCIPAL			SIB	02 0	ATE O ZE 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 (THE LIMIT IS 35 MG/L AS A DAILY MAX.) MG/L. T-1 WHEN DISCHARGING (24 HR. COMP.):

DERVER VALLEY POWER STATION

ADDRESSP. D. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT FACILITY

ATTN: KEVIN OSTROWSKI

LOCATION

PA 15077

DISCHARGE MONITORING REPORT (DMR)

403 A DISCHARGE NUMBER MAJOR (SUBR 05)

Form Approved. OMB No. 2040-0004

PA0025615 PERMIT NUMBER

FROM

F - FINAL

MG/L. (THE LIMIT IS 35 MG/L AS A DAILY MAX.)

CONDENSATE BLOWDOWN & RIVE WAT

MONITORING PERIOD YEAR MO DAY YEAR MO 12 UI. TO GI 12

*** NO DISCHARGE IX | ***

		QUAN	TITY OR LOADING	1			pleting this				
PARAMETER HYDRAZINE		<				NUANTITY OR CON	CENTRATION		NO.	FREQUENCY OF	Y SAMP
	CAMPLE	AVERAGE *****	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
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NAME OF THE OWNER OWNER OF THE OWNER	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE O	prepared i		s document and all attach ervision in accordance with		ned			ELEPHONE		DATE	<u> </u>
Joseph W. Venzon	submitted	Based on my inquiry of t	operly gather and evaluate	the information	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	101	/		-	DATE	Τ
Chemistry Manager	submitted	is to the hest of my know	e for gathering the informa	tion, the informat	ion QUIVIX	gatalera R	skJWV	16	_ [.		
TYPED OR PRINTED	i am aware	s triat triefe are significant	penaities for submitting fal		I SIGNALU	RE OF PRINCIPAL E	KECUTIVE /24	WZ-SI NUMBER	3 (02/01	<u> 28</u>
MMENTS AND EXPLANATION OF AN DRAZINE AMD AMMONI 1 WHEN DISCHARGING	NA MICH VEICUNIS (D**						CODE	NUMBER	ĮΥ	EAR MO	DA'

the control of the second of t

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) BEAVER VALLEY POWER STATION

ADDRESSP. O. BOX 4

ATTN: DAVID DRNDORF

SHIPPINGPORT **FACILITY**

PA 15077

LOCATION

ATTN: KEVIN OSTROWSKI

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

DAY

Oi

PA0025615 PERMIT NUMBER

15%

YEAR MO

01

FROM

413 A DISCHARGE NUMBER

12

YEAR MO

TO DI

MONITORING PERIOD

DAY

31

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

BULK FUEL STORAGE DRAIN

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

		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION					FREQUENC OF	SAMPLE TYPE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
[-]-}	SAMPLE MEASUREMENT	***	**************************************		7.34	林林林林林	7.34	(12)	0	1/31 *	GRAB
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OIL & GREASE	SAMPLE MEASUREMENT	****	****		校长校长校	25.0	(S.0	(19)	0	1/31	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	****	15 MD AVG	DAILY MX	MG/L	W	EEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	20.001	100.02	(03)	***	***	****			1/7	EST
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REFORT MO AVG	REPORT DAILY MX	Med	华兴松桥 徐徐	****	******	****	W	EEKLY	ESTIMA
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	SAMPLE MEASUREMENT								Table 1 to 1		
	PERMIT REQUIREMENT		100			Part of the second seco					
,	SAMPLE MEASUREMENT					·					
	PERMIT REQUIREMENT					1.00					
NAME/TITLE PRINCIPAL EXECUTIVE O	prepa	fy under penalty of law that red under my direction or s	upervision in accordance	with a system d	lesigned 🔔 ,	. .	\ -	TELEPHON	VE		DATE
Joseph W. Venzon	submi	ure that qualified personnel tted. Based on my inquiry se persons directly respons	of the person or persons v	who manage the	e system,	labolus	FOR JW/	A 1A-	/112		a 1 10
Chemistry Manager	submi	tted is , to the best of my ki	nowledge and belief, true, ant penalties for submitting	accurate, and of false information	complete. SIGNA	ATURE OF PRINCIPAL		4 692-			31 28 MO DAY
TYPED OR PRINTED COMMENTS AND EXPLANATION OF A		ing the possibility of fine an Reference all attachm		ng violations.		V	I CO	DE L. MOMBE	-: L	112011	10 5/11

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

ATTN: DAVID GRNDGRF

SHIPPINGPORT PA 15077

FACILITY LOCATION

ATTN: KEVIN OSTROWSKI

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

PA0025615 PERMIT NUMBER 501 A DISCHARGE NUMBER MAJOR (SUBR 05) F - FINAL Form Approved. OMB No. 2040-0004

UNIT 1 GENRTR BLWDWN FILT BW

| MONITORING PERIOD | YEAR | MO | DAY | FROM | O1 | 12 | O1 | TO | O1 | 12 | 31 |

*** NO DISCHARGE | X | ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUAN	ITITY OR LOADING		G	QUANTITY OR CONCENTRATION					SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	
SULIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	****	***		****			(19)			-
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****		### ####	*****	BO AVG	DAILY M	X MG/L	W	EEKLYG	RAB
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50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	****	****	****	****	M	EEKLYE	STIMA
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NAME/TITLE PRINCIPAL EXECUTIVE OF	prepare	y under penalty of law that ed under my direction or si	pervision in accordance v	vith a system de:	signed ,	۸		TELEPHON	E	DA	TE
Joseph W. Venzon Chemistry Manager	submit or thos	re that qualified personnel ted. Based on my inquiry of the persons directly respons ted is , to the best of my kn	of the person or persons with the persons with the information of the	the manage the mation, the information.	system,	TURE OF PRINCIPAL	EXECUTIVE T	74 1682-SI	(3	020	1 28
TYPED OR PRINTED COMMENTS AND EXPLANATION OF AN	I am av	ted is, to the best of my kn ware that there are significang the possibility of fine and Reference all attachm	nt penalties for submitting d imprisonment for knowing ents here)	false information g violations.	OFF	ICER OR AUTHORIZE	D AGENT	AREA NUMBE	7	YEAR M	O DAY

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.