



P.O. Box 4, Route 168
Shippingport, PA 15077

April 25, 2002

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 for March 2002 as submitted to the Pennsylvania Department of Environmental Protection.

Sincerely,

Bill Pearce
Plant Manager

DJS

C: J.W. Venzon
Licensing File

IE25



P.O. Box 4, Route 168
Shippingport, PA 15077

April 25, 2002

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

NPDES Permit PA0025615, Notice of Non-Compliance
Outfall 012

Dear Sir or Madam:

During the month of March, Outfall 012 (ERF HVAC Blowdown) exceeded the monthly average and monthly maximum Zinc effluent limit of 1.0 mg/L. The Zinc was measured at 4.54 mg/L on March 4, 2002; 5.27 mg/L on March 13, 2002; 5.03 mg/L on March 18, 2002; and 4.66 mg/L on March 25, 2002.

Outfall 012 is the blowdown from the HVAC system at the Beaver Valley Emergency Response Facility (ERF). Zinc in the blowdown is attributed to the corrosion of the HVAC system. Zinc is not added to the system.

Beaver Valley is currently investigating alternative treatment of the HVAC system to minimize corrosion of the system and is working with the Pennsylvania DEP on an acceptable compliance schedule with respect to effluent limits at Outfall 012.

If you have any questions, contact me at 724 682-5113.

Sincerely,

Joseph W. Venzon
Chemistry and Environmental
Manager

DJS

C: J.W. Venzon
S.F. Brown
Tiffany Shepard
Central File

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16) PA0025615 PERMIT NUMBER	(17-19) 001 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 02 03 01 (20-21) (22-23) (24-25)	YEAR MO DAY 02 03 31 (26-27) (28-29) (30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	24.9	46.5		*	*	*		DAILY	CONT
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	DAILY	CONT
Free Available Chlorine	Sample Measurement	*	*		*	0.06	0.31	0	CONT	RECD
	Permit Requirement	*	*	*	*	AVG CONC 0.2	MAX CONC 0.5	MG/L	CONT	RECORDED
Total Residual Chlorine	Sample Measurement	*	*		*	0.12	0.18	0	1/7	GRAB
	Permit Requirement	*	*	*	*	0.5	INSTANT MAX 1.25	MG/L	1/WEEK	GRAB
Clamrol (CT-1)	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	NOT DETECTABLE		MG/L	WHEN DISCHARG	24 HOUR COMPOSITE
Betz DT-1	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	35.0	MG/L	WHEN DISCHARG	24 HOUR COMPOSITE
Chromium	Sample Measurement	*	*		*	*	*			
	Permit Requirement	*	*	*	*	0.2	0.2	MG/L	2/YEAR	24 HOUR COMPOSITE
Zinc	Sample Measurement	*	*		*	*	*			
	Permit Requirement	*	*	*	*	1.0	1.0	MG/L	2/YEAR	24 HOUR COMPOSITE
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE	
JOSEPH W. VENZA CHEMISTRY MANAGER TYPE OR PRINT							724 682-5113		02 04 25 YEAR MO DAY	
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER								

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

* NO CLAMROL CT-1 WAS APPLIED OR DISCHARGED IN MARCH 2002
 ** HYDRAZINE AND AMMONIA MONITORING ONLY APPLY DURING WET LAY-UP CONDITIONS.
 PLANT WAS NOT IN WET-LAY-UP IN MARCH 2002.

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

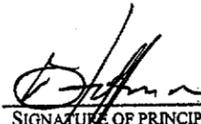
(2-16)			(17-19)			
PA0025615			001 (CONT)			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

FROM

NOTE: Read instructions before completing this form

Parameter (32-37)		QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		(3 Card Only) (46-53)			(4 Card Only) (38-45)						
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Hydrazine	Sample Measurement	*	*		**	**	**			**	**
	Permit Requirement	*	*	*	NOT DETECTABLE USING ASTM D-1385			MG/L	*	1/WEEK	GRAB
Ammonia	Sample Measurement	*	*		**	**	**			**	**
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	1/WEEK	GRAB
Phenols	Sample Measurement	*	*		40.01	40.01	40.01			2/31	GRAB
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	2/MONTH	GRAB
Iron	Sample Measurement	*	*		*	0.64	0.70			2/31	GRAB
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	2/MONTH	GRAB
Aluminum	Sample Measurement	*	*		*	0.28	0.34			2/31	GRAB
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	2/MONTH	GRAB
pH	Sample Measurement	*	*		8.12	*	8.28		0	1/7	GRAB
	Permit Requirement	*	*	*	6.0		9.0	S.U.	*	1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*		*	*	*
	Permit Requirement	*	*	*	*	*	*		*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

* NO CLAIMTROL (CT-1) APPLICATION WAS APPLIED OR DISCHARGED IN MARCH 2002.

** PLANT WAS NOT IN NET-LAN-UP IN MARCH 2002.

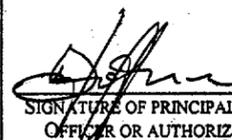
NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16)			(17-19)			
PA0025615			101			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.037	0.195		*	*	*		DAILY	CONT
	Permit Requirement	MONITOR AND REPORT							DAILY	CONT
Suspended Solids	Sample Measurement	*	*		*	4.2	4.9	0	1/7	2 HR COMP 2 HOUR COMPOSITE
	Permit Requirement	MONITOR AND REPORT				30	100		1/WEEK	
Oil and Grease	Sample Measurement	*	*		*	25.0	25.0	0	1/7	GRAB
	Permit Requirement	MONITOR AND REPORT				15	20		1/WEEK	GRAB
Hydrazine	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	MONITOR AND REPORT							1/WEEK	GRAB
Ammonia	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	MONITOR AND REPORT							1/WEEK	GRAB
pH	Sample Measurement	*	*		7.28	*	7.57	0	1/7	GRAB
	Permit Requirement	MONITOR AND REPORT				6.0	9.0		1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	MONITOR AND REPORT							*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENEON CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
			724 682-5113 AREA CODE NUMBER	02 YEAR	04 MO

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.
* HYDRAZINE AND AMMONIA MONITORING ONLY APPLY DURING CONDITIONS OF WET LAY-UP
PLANT WAS NOT IN WET LAY-UP IN MARCH 2002.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16)			(17-19)				
PA0025615			301				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)	Sample Measurement Permit Requirement	(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
Flow		MONITOR AND REPORT			MGD	*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids		*	*	*	*	30	100	MG/L	*	2/MONTH	GRAB
Oil and Grease		*	*	*	*	15	20	MG/L	*	2/MONTH	GRAB
		*	*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE 724 682-5113 AREA CODE NUMBER	DATE 02 YEAR 04 MO 25 DAY
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

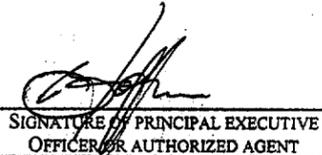
FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			401				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No DISCHARGE

NOTE: Read instructions before completing this form

Parameter (32-37)		QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM			
Flow	Sample Measurement			MGD	*	*	*	*		
	Permit Requirement	MONITOR AND REPORT							1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*			*		
	Permit Requirement	*	*		*	30	100		2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*		*			*		
	Permit Requirement	*	*		*	15	20		2/MONTH	GRAB
pH	Sample Measurement	*	*		*			*		
	Permit Requirement	*	*		6.0	*	*		2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Vernon CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			74 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			501				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No DISCHARGE

NOTE: Read instructions before completing this form

Parameter (32-37)		QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM			
Flow	Sample Measurement	*	*	MGD	*	*	*	*	1/WEEK	ESTIMATE
	Permit Requirement	MONITOR AND REPORT			*	*	*	*		
Total Suspended Solids	Sample Measurement	*	*	*	*	30	100	MG/L	1/WEEK	GRAB
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venables</i> CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>[Signature]</i>	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

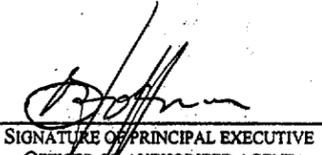
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			002				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	20.001	20.001		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*		1/WEEK
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>Joseph W. Venzon</u> <u>CHEMISTRY MANAGER</u> TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

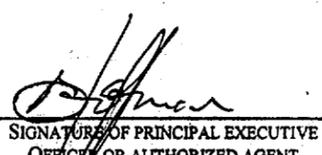
NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)			
PA0025615			102			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	40.001	40.001	MGD	*	*	*	*	2/31	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*			
Suspended Solids	Sample Measurement	*	*	*	*	44.0	44.0	0	2/31	GRAB
	Permit Requirement	*	*		*	30	100			
Oil and Grease	Sample Measurement	*	*	*	*	45.0	45.0	0	2/31	GRAB
	Permit Requirement	*	*		*	15	20			
pH	Sample Measurement	*	*	*	7.54	*	7.92	0	2/31	GRAB
	Permit Requirement	*	*		*	6.0	*			
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*			
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*			
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>Joseph W. Gordon</u> CHEMIST MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 03 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

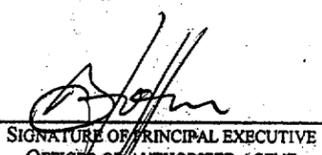
NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16)			(17-19)				
PA0025615			003				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.086	0.228	MGD	*	*	*		2/31	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*		2/MONTH	ESTIMATE
Iron	Sample Measurement	*	*	*	*	0.58	0.80		2/31	GRAB
	Permit Requirement	MONITOR AND REPORT			*				2/MONTH	GRAB
Aluminum	Sample Measurement	*	*	*	*	0.80	0.87		2/31	GRAB
	Permit Requirement	MONITOR AND REPORT			*				2/MONTH	GRAB
Phenols	Sample Measurement	*	*	*	*	20.01	20.01		2/31	GRAB
	Permit Requirement	MONITOR AND REPORT			*				2/MONTH	GRAB
Nitrate-Nitrite	Sample Measurement	*	*	*	*	6.5	7.0		2/31	GRAB
	Permit Requirement	MONITOR AND REPORT			*				2/MONTH	GRAB
Phosphorus	Sample Measurement	*	*	*	*	0.55	1.0		2/31	GRAB
	Permit Requirement	MONITOR AND REPORT			*				2/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Nersisyan CHEMIST MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724-682-5113 AREA CODE NUMBER	02 YEAR

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

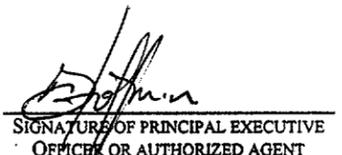
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)			
PA0025615			103			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.057	0.153		*	*	*		3/31	MEAS
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	2/MONTH	ESTIMATE
Suspended Solid	Sample Measurement	*	*		*	27.9	44.1	0	4/31	24 HR COMP
	Permit Requirement	*	*	*	*	30	100	MGL	2/MONTH	24 HOUR COMPOSITE
pH	Sample Measurement	*	*		6.17	*	6.99	0	2/31	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENTON Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 03 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

PERMITTEE NAME ADDRESS (Include Facility Name / Location)

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

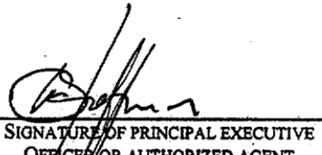
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16)			(17-19)				
PA0025615			203				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.010	0.09		*	*	*	0	1/7	MEAS
	Permit Requirement	0.023	*	MGD	*	*	*	*	1/WEEK	MEASURED
CBOD-5 Day	Sample Measurement	*	*		*	2.4	2.6	0	2/31	8 HR COMP
	Permit Requirement	*	*	*	*	25	50	*	2/MONTH	8 HOUR COMPOSITE
Suspended Solids	Sample Measurement	*	*		*	13.2	18.6	0	2/31	8 HR COMP
	Permit Requirement	*	*	*	*	30	60	*	2/MONTH	8 HOUR COMPOSITE
Total Residual Chlorine	Sample Measurement	*	*		*	0.39	0.49	0	2/31	GRAB
	Permit Requirement	*	*	*	*	1.4	INST MAX 3.3	*	2/MONTH	GRAB
Fecal Coliform May 1 to Sep 30 Oct 1 to Apr 30	Sample Measurement	*	*		*	37.5	53.0	0	2/31	GRAB
	Permit Requirement	*	*	*	*	200 2000	1000 *	*	2/MONTH	GRAB
pH	Sample Measurement	*	*		*	7.23	7.91	0	2/31	GRAB
	Permit Requirement	*	*	*	*	6.0	9.0	*	2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Varzow Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

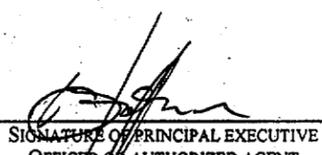
(2-16)			(17-19)			
PA0025615			303			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

FROM

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.09	0.056		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*		1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	14.9	34.6	0	5/31	GRAB
	Permit Requirement	*	*		*	30	100		1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	45.0	45.0	0	1/7	GRAB
	Permit Requirement	*	*		*	15	20		1/WEEK	GRAB
pH	Sample Measurement	*	*		7.37	*	7.74	0	1/7	GRAB
	Permit Requirement	*	*		6.0	*	9.0		1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Verzan Clemens Mawasa TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724-682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

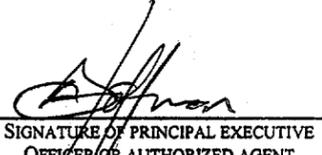
FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16) PA0025615 PERMIT NUMBER	(17-19) 403 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 02 03 01 (20-21) (22-23) (24-25)	YEAR MO DAY 02 03 31 (26-27) (28-29) (30-31)

No Discharge

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
			AVERAGE	MAXIMUM	UNITS		MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	*				*				*	1/WEEK	ESTIMATE
	Permit Requirement		MONITOR AND REPORT							*		
Suspended Solids	Sample Measurement	*				*				*	1/WEEK	GRAB
	Permit Requirement						30	100				
Oil and Grease	Sample Measurement	*				*				*	1/WEEK	GRAB
	Permit Requirement						15	20				
Hydrazine	Sample Measurement	*				*	NOT DETECTABLE USING ASTM D-1385				1/WEEK	GRAB
	Permit Requirement											
Ammonia	Sample Measurement	*				*	MONITOR AND REPORT				1/WEEK	GRAB
	Permit Requirement											
Total Residual Chlorine	Sample Measurement	*				*						
	Permit Requirement						0.5	INSTANT MAX 1.25			1/WEEK	GRAB
Clamtrol (CT-1)	Sample Measurement	*				*	NOT DETECTABLE				WHEN DISCHARGE	24 HOUR COMPOSITE
	Permit Requirement											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPA W. VENZA CHEMIST MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE 724 682-5113	DATE 02 01 25 YEAR MO DAY
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

PERMITTEE NAME ADDRESS (Include Facility Name / Location)

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

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

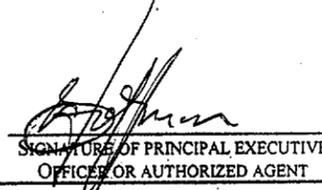
(2-16)			(17-19)				
PA0025615			403				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No DISCHARGE

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Betz DT-1	Sample Measurement	*	*	*	*	*	*	*		
	Permit Requirement	*	*	*	*	*	35.0	MG/L	*	WHEN DISCHARGE 24 HOUR COMPOSITE
pH	Sample Measurement	*	*	*	*	*	*	*		
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	*	1/WEEK GRAB
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>Joseph W. Venian</u> Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

Facility Name / Location

DISCHARGE MONITORING REPORT (DMR)

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16) PA0025615 PERMIT NUMBER	(17-19) 004 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 02 03 01 (20-21) (22-23) (24-25)	YEAR MO DAY 02 03 31 (26-27) (28-29) (30-31)

No Discharge

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	MEASURED
Free Available Chlorine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*		AVG CONC 0.2	MAX CONC 0.5	MG/L	1/WEEK	GRAB
Total Residual Chlorine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*		0.5	1.25	MG/L	1/WEEK	GRAB
Iron	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*		MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Aluminum	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*		MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Phenols	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*		MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Chromium	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*		0.2	0.2	mg/l	2/YEAR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				TELEPHONE		DATE		
JOSEPH W. GONZON Chemistry Manager TYPE OR PRINT						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		724 682-5113 AREA CODE NUMBER		02 04 25 YEAR MO DAY
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)										

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 PERMIT NUMBER
(17-19) 004 (CONT) DISCHARGE NUMBER

No Discharge

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

FROM

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
02 03 01 02 03 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
			AVERAGE	MAXIMUM	UNITS		MINIMUM	AVERAGE	MAXIMUM			
Zinc	Sample Measurement	*	*		*							
	Permit Requirement	*	*	*	*	1.0	1.0	MG/L	*	2/YEAR	GRAB	
pH	Sample Measurement	*	*									
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	*	1/WEEK	GRAB	
	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	
	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	
	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	
	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	
	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph W. Venzon
Chemist Manager
TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Joseph W. Venzon

TELEPHONE AREA CODE NUMBER
724 682-5113

DATE YEAR MO DAY
02 04 25

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

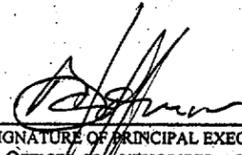
NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			008 (CONT)				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Phenols	Sample Measurement	*	*	*	*	20.01	20.01		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Zinc	Sample Measurement	*	*	*	*	0.07	0.09		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Color	Sample Measurement	*	*	*	*	85	136		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		UNITS	2/MONTH	GRAB
pH	Sample Measurement	*	*	*	7.65	*	7.91	0	2/31	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	2/MONTH	GRAB
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE			
			724 682-5113	02	04	25	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 (17-19) 006
PERMIT NUMBER DISCHARGE NUMBER

No Discharge

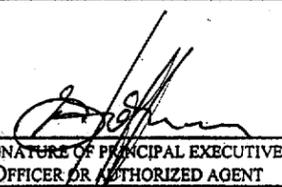
FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

FROM

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT						*	1/WEEK	ESTIMATE
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>Joseph W. Venezia</u> CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16) PA0025615 PERMIT NUMBER
 (17-19) 007 DISCHARGE NUMBER

No DISCHARGE

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

FROM

MONITORING PERIOD
 YEAR MO DAY TO YEAR MO DAY
 02 03 01 TO 02 03 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)	Sample Measurement Permit Requirement	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow		MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
Free Available Chlorine		*	*	*	*	0.2 AVG CONC	0.3 MAX CONC	MG/L	1/WEEK	GRAB
Total Residual Chlorine		*	*	*	*	0.5	1.25	MG/L	1/WEEK	GRAB
pH		*	*	*	6.0	*	9.0	S.U.	1/WEEK	GRAB
		*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE AREA CODE NUMBER 724 682-5113	DATE YEAR MO DAY 02 04 25
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

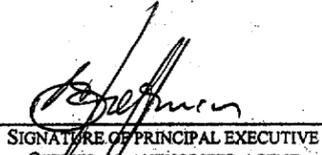
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			008				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	40.001	40.001	MGD	*	*	*	*	1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*			
Suspended Solids	Sample Measurement	*	*	*	*	5.5	6.9	0	2/31	GRAB
	Permit Requirement	*	*		*	30	100			
Oil and Grease	Sample Measurement	*	*	*	*	45.0	45.0	0	2/31	GRAB
	Permit Requirement	*	*		*	15	20			
Ammonia	Sample Measurement	*	*	*	*	40.10	40.10	*	2/31	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT				
Iron, tot	Sample Measurement	*	*	*	*	0.91	1.1	*	2/31	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT				
Aluminum	Sample Measurement	*	*	*	*	0.11	0.12	*	2/31	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT				
Manganese	Sample Measurement	*	*	*	*	0.10	0.10	*	2/31	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENEON CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
			724 682-5113	02 04 25 YEAR MO DAY
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

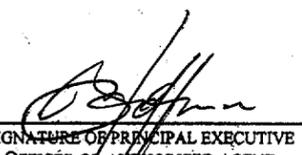
(2-16) PA0025615 PERMIT NUMBER	(17-19) 110 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 02 03 01 (20-21) (22-23) (24-25)	YEAR MO DAY 02 03 31 (26-27) (28-29) (30-31)

No Discharge

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	*	*	MGD	*	*	*	*	I/WEEK	ESTIMATE
	Permit Requirement	MONITOR AND REPORT			*	*	*	*		
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. UENEN CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE 724 682-5113 AREA CODE NUMBER	DATE 02 01 25 YEAR MO DAY
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

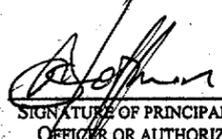
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)			
PA0025615			010			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
Flow	Sample Measurement	1.94	2.88		*	*	*		1/7	MEAS
	Permit Requirement	MONITOR AND REPORT							1/WEEK	MEASURED
Free Available Chlorine	Sample Measurement	*	*		*	0.0	0.0	0	1/7	GRAB
	Permit Requirement	*	*		*	AVG CONC 0.2	MAX CONC 0.5		1/WEEK	GRABWHILE CHLORO
Total Residual Chlorine	Sample Measurement	*	*		*	0.0	0.0	0	1/7	GRAB
	Permit Requirement	*	*		*	0.5	1.25		1/WEEK	GRABWHILE CHLORO
Clamtrol CT-1	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	NOT DETECTABLE			WHEN DISCHARG	24 HOUR COMPOSITE
Betz DT-1	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*		35.0		WHEN DISCHARG	24 HOUR COMPOSITE
pH	Sample Measurement	*	*		7.58	*	7.77	0	1/7	GRAB
	Permit Requirement	*	*		6.0	*	9.0		1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENZON Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
			AREA CODE NUMBER 216-682-5113	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.
 * NO CLAMTROL (CT-1) APPLICATION WAS COMPLETED IN MARCH 2002.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 (17-19) 011
PERMIT NUMBER DISCHARGE NUMBER

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

FROM

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
02 03 01 02 03 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
Flow	Sample Measurement	0.004	0.004		*	*	*		17	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*		1/WEEK
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venison</i> CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	<i>[Signature]</i> SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

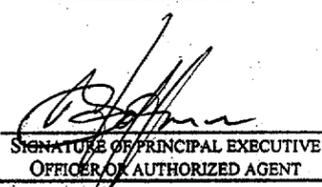
NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			111				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.002	0.002		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	24.0	24.0	0	1/7	GRAB
	Permit Requirement	*	*		*	30	100	MG/L	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	25.0	25.0	0	1/7	GRAB
	Permit Requirement	*	*		*	15	20	MG/L	1/WEEK	GRAB
pH	Sample Measurement	*	*		7.23	*	7.68	0	1/7	GRAB
	Permit Requirement	*	*		6.0	*	9.0	S.U.	1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. Venzal CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE		
			224 682-5113	02 01 25		
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 (17-19) 211
PERMIT NUMBER DISCHARGE NUMBER

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

FROM

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
02 03 01 02 03 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.002	0.002		*	*	*		1/1	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*		1/WEEK
Suspended Solids	Sample Measurement	*	*		*	12.3	14.4	0	1/1	GRAB
	Permit Requirement	*	*		*	30	100		1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	15.0	15.0	0	1/1	GRAB
	Permit Requirement	*	*		*	15	20		1/WEEK	GRAB
pH	Sample Measurement	*	*		7.44	*	7.71	0	1/1	GRAB
	Permit Requirement	*	*		6.0	*	9.0		1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph W. Venzan
Chemistry Manager
TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
[Signature]

TELEPHONE
74682-5113
AREA CODE NUMBER

DATE
02 04 25
YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

Facility Name / Location

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

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16)			(17-19)				
PA0025615			012				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	20.001	20.001		*	*	*		1/31	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/MONTH	ESTIMATE
Total Dissolved Solids	Sample Measurement	*	*		*	794	968		1/7	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	1/WEEK	GRAB
Chromium	Sample Measurement	*	*		*	0.003	0.003	0	1/7	GRAB
	Permit Requirement	*	*	*	*	0.2	0.2	MG/L	1/WEEK	GRAB
Zinc	Sample Measurement	*	*		*	4.9	5.3	4*	1/7	GRAB
	Permit Requirement	*	*	*	*	1.0	1.0	MG/L	1/WEEK	GRAB
Copper	Sample Measurement	*	*		*	0.11	0.11		1/7	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	1/WEEK	GRAB
pH	Sample Measurement	*	*		8.64	*	8.64	0	1/31	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	1/MONTH	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph W. Uenzel
Chemist Manager
TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

[Signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
724 682-5113
AREA CODE NUMBER

DATE
02 04 25
YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.
* PER AGREEMENT WITH DEP SEE ATTACHED LETTER FOR EXPLANATION OF EXCURSION

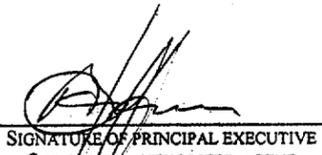
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16)			(17-19)				
PA0025615			013				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.021	0.042	MGD	*	*	*	0	1/WEEK	ESTIMATE
	Permit Requirement	MONITOR AND REPORT			*	*	*			
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.11	0.18	0	2/31	CALC
	Permit Requirement	*	*		*	0.5	1.25			
Copper	Sample Measurement	*	*	*	*	0.04	0.10	0	1/W	CALC
	Permit Requirement	*	*		*	MONITOR AND REPORT				
Chlorobenzene	Sample Measurement	*	*	*	*	10.005	10.005	0	2/90	CALC
	Permit Requirement	*	*		*	MONITOR AND REPORT				
Temperature	Sample Measurement	*	75	°F	*	*	*	0	1/W	GRAB
	Permit Requirement	*	110		*	*	*			
Cyanide, tot	Sample Measurement	*	*	*	*	10.01	10.01	0	2/31	CALC
	Permit Requirement	*	*		*	MONITOR AND REPORT				
pH	Sample Measurement	*	*	*	7.04	*	7.79	0	1/W	CALC
	Permit Requirement	*	*		*	6.0	*			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENZON CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16)			(17-19)				
PA0025615			113				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.018	*	MGD	*	*	*	0	1/7	MEAS
	Permit Requirement	0.043	*		*	*	*	*	*	1/WEEK
CBOD-5 Day	Sample Measurement	*	*	MG/L	*	22.0	22.0	0	2/31	8 HR COMP COMPOSITE
	Permit Requirement	*	*		25	50	*	2/MONTH	8 HR COMP COMPOSITE	
Suspended Solids	Sample Measurement	*	*	MG/L	*	5.2	5.6	0	2/31	8 HR COMP COMPOSITE
	Permit Requirement	*	*		30	60	*	2/MONTH	8 HR COMP COMPOSITE	
Total Residual Chlorine	Sample Measurement	*	*	MG/L	*	0.13	0.20	0	2/31	GRAB
	Permit Requirement	*	*		1.4	INST. MAX 3.3	*	2/MONTH	GRAB	
Fecal Coliform May 1 to Oct 31 Nov 1 to Apr 30	Sample Measurement	*	*	#/100ML	*	3.5	5.0	0	2/31	GRAB
	Permit Requirement	*	*		200	1000	*	2/MONTH	GRAB	
pH	Sample Measurement	*	*	S.U.	*	7.53	7.93	0	2/31	GRAB
	Permit Requirement	*	*		6.0	9.0	*	2/MONTH	GRAB	
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 03 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 (17-19) 213
PERMIT NUMBER DISCHARGE NUMBER

No Discharge

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

FROM

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
02 03 01 TO 02 03 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
			AVERAGE	MAXIMUM	UNITS		MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	*				*	*	*	*			
	Permit Requirement		MONITOR AND REPORT			MGD	*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*			*						
	Permit Requirement	*	*			*	30	100	MGL	*	2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*			*						
	Permit Requirement	*	*			*	15	20	MGL	*	2/MONTH	GRAB
pH	Sample Measurement	*	*			*						
	Permit Requirement	*	*			*	6.0	9.0	S.U.	*	2/MONTH	GRAB
	Sample Measurement	*	*			*	*	*	*	*	*	*
	Permit Requirement	*	*			*	*	*	*	*	*	*
	Sample Measurement	*	*			*	*	*	*	*	*	*
	Permit Requirement	*	*			*	*	*	*	*	*	*
	Sample Measurement	*	*			*	*	*	*	*	*	*
	Permit Requirement	*	*			*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>Joseph W. Venzon</u> CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE 724 682-5113 AREA CODE NUMBER	DATE 02 04 25 YEAR MO DAY
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

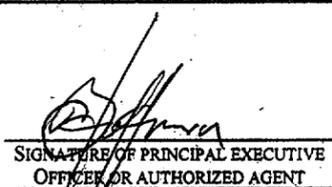
NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 PERMIT NUMBER	(17-19) 313 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 02 03 01 (20-21) (22-23) (24-25)	YEAR MO DAY 02 03 31 (26-27) (28-29) (30-31)

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.002	0.002		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	5.5	7.2	0	1/7	GRAB
	Permit Requirement	*	*		*	30	100	MG/L	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	15.0	15.0	0	1/7	GRAB
	Permit Requirement	*	*		*	15	20	MG/L	1/WEEK	GRAB
pH	Sample Measurement	*	*		7.15	*	7.40	0	1/7	GRAB
	Permit Requirement	*	*		6.0	*	9.0	S.U.	1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Nenzon CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

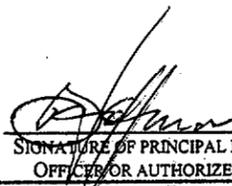
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			413				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
Flow	Sample Measurement	40.001	40.001		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT						*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	44.0	44.0	0	2/31 *	GRAB
	Permit Requirement	*	*	*	*	30	100		1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	45.0	45.0	0	2/31 *	GRAB
	Permit Requirement	*	*	*	*	15	20		1/WEEK	GRAB
pH	Sample Measurement	*	*		7.34	*	7.64	0	2/31 *	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0		1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*		*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. UENZEL Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.
 * DISCHARGE OCCURRED IN ONLY 2 WEEKS IN MARCH 2002.



P.O. Box 4, Route 168
Shippingport, PA 15077

April 25, 2002

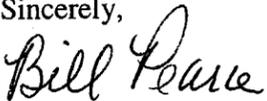
Document Control Desk
U.S. Nuclear Regulatory Commission
Washington, DC 20555

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 for March 2002 as submitted to the Pennsylvania Department of Environmental Protection.

Sincerely,

Bill Pearce
Plant Manager

DJS

C: J.W. Venzon
Licensing File



P.O. Box 4, Route 168
Shippingport, PA 15077

April 25, 2002

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

NPDES Permit PA0025615, Notice of Non-Compliance
Outfall 012

Dear Sir or Madam:

During the month of March, Outfall 012 (ERF HVAC Blowdown) exceeded the monthly average and monthly maximum Zinc effluent limit of 1.0 mg/L. The Zinc was measured at 4.54 mg/L on March 4, 2002; 5.27 mg/L on March 13, 2002; 5.03 mg/L on March 18, 2002; and 4.66 mg/L on March 25, 2002.

Outfall 012 is the blowdown from the HVAC system at the Beaver Valley Emergency Response Facility (ERF). Zinc in the blowdown is attributed to the corrosion of the HVAC system. Zinc is not added to the system.

Beaver Valley is currently investigating alternative treatment of the HVAC system to minimize corrosion of the system and is working with the Pennsylvania DEP on an acceptable compliance schedule with respect to effluent limits at Outfall 012.

If you have any questions, contact me at 724 682-5113.

Sincerely,

Joseph W. Venzon
Chemistry and Environmental
Manager

DJS

C: J.W. Venzon
S.F. Brown
Tiffany Shepard
Central File

DISCHARGE MONITORING REPORT SUPPLEMENTAL SEWAGE SLUDGE REPORT

Month: MARCH
Year: 2002

Instructions:

1. Complete monthly and submit with each DMR. Attach additional sheets and comments as needed for completeness and clarity.
2. Sludge production information will be used to evaluate plant performance. Report only sludge which has been removed from digesters and other solids which have been permanently removed from the treatment process. Do not include sludge from other plants which is processed at your facility.
3. In the disposal site section, report all sludge leaving your facility for disposal. If another plant processes and disposes of your sludge, just provide the name of that plant. If you dispose of sludge from other plants, include their tonnage in the disposal site section and provide their names and individual dry tonnage on the back of this form.
4. If no sludge was removed, note on form.

Permittee: FENOC
Plant: Beaver Valley Power Station
NPDES: PA0025615
Municipality: Shippingport Borough
County: Beaver

For sludge that is incinerated:
Pre-incineration weight = _____ dry tons
Post-incineration weight = _____ dry tons

UNIT 1

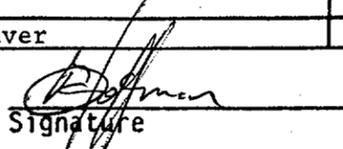
SLUDGE PRODUCTION INFORMATION (prior to incineration)

HAULED AS LIQUID SLUDGE				HAULED AS DEWATERED SLUDGE			
(Gallons)	X (% Solids)	(Conversion Factor)	= Dry Tons	(Tons of Dewatered Sludge)	X (% Solids)	X (.01)	= Dry Tons
8,000	2.0	.0000417	0.667			.01	
TOTAL			= 0.667	TOTAL			=

DISPOSAL SITE INFORMATION: List all sites, even if not used this month

	Site 1	Site 2	Site 3	Site 4
Name:	Borough of Monaca Sewage Treatment Plant	Hopewell Township		
Permit No.:	PA0020125	PA0026328		
Dry Tons Disposed:		0.667		
Type: (check one)				
Landfill				
Agr. Utilization				
Other (specify)				
County:	Beaver	Beaver		

(SSR-1 3/21/91)


 Signature _____ Chemistry Manager _____
 Title _____ Date 4/26/02 Telephone (724) 682-5113

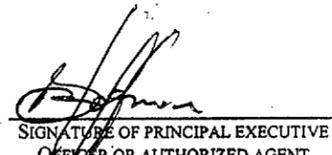
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			001				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
			AVERAGE	MAXIMUM	UNITS		MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	24.9	46.5		*	*	*		*	DAILY	CONT	
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	*	DAILY	CONT	
Free Available Chlorine	Sample Measurement	*	*		*	0.06	0.31		0	CONT	RECD	
	Permit Requirement	*	*	*	*	AVG CONC 0.2	MAX CONC 0.5	MG/L	*	CONT	RECORDED	
Total Residual Chlorine	Sample Measurement	*	*		*	0.12	0.18		0	1/7	GRAB	
	Permit Requirement	*	*	*	*	0.5	INSTANT MAX 1.25	MG/L	*	1/WEEK	GRAB	
Clamtrol (CT-1)	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	NOT DETECTABLE			MG/L	*	WHEN DISCHARG	24 HOUR COMPOSITE
Betz DT-1	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	*	35.0	MG/L	*	WHEN DISCHARG	24 HOUR COMPOSITE	
Chromium	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	0.2	0.2	MG/L	*	2/YEAR	24 HOUR COMPOSITE	
Zinc	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	1.0	1.0	MG/L	*	2/YEAR	24 HOUR COMPOSITE	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENZA CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
			724 682-5113	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.
 * NO CLAMTROL CT-1 WAS APPLIED OR DISCHARGED IN MARCH 2002
 ** HYDRAZINE AND AMMONIA MONITORING ONLY APPLY DURING WET LAY-UP CONDITIONS.
 PLANT WAS NOT IN WET-LAY-UP IN MARCH 2002.

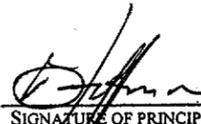
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16)			(17-19)				
PA0025615			001 (CONT)				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Hydrazine	Sample Measurement	*	*		**	**	**		**	**
	Permit Requirement	*	*	*	NOT DETECTABLE USING ASTM D-1385			*	1/WEEK	GRAB
Ammonia	Sample Measurement	*	*		**	**	**		**	**
	Permit Requirement	*	*	*	MONITOR AND REPORT			*	1/WEEK	GRAB
Phenols	Sample Measurement	*	*		40.01	40.01	40.01		2/31	GRAB
	Permit Requirement	*	*	*	MONITOR AND REPORT			*	2/MONTH	GRAB
Iron	Sample Measurement	*	*		*	0.64	0.70		2/31	GRAB
	Permit Requirement	*	*	*	MONITOR AND REPORT			*	2/MONTH	GRAB
Aluminum	Sample Measurement	*	*		*	0.28	0.34		2/31	GRAB
	Permit Requirement	*	*	*	MONITOR AND REPORT			*	2/MONTH	GRAB
pH	Sample Measurement	*	*		8.12	*	8.28	0	1/7	GRAB
	Permit Requirement	*	*	*	6.0		9.0	S.U.	1WEEK	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENZA CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

* NO CLAMTROL (CT-1) APPLICATION WAS APPLIED OR DISCHARGED IN MARCH 2002.

** PLANT WAS NOT IN WET-LAY-UP IN MARCH 2002.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16) PA0025615 PERMIT NUMBER			(17-19) 101 DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)	Sample Measurement / Permit Requirement	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-55)	MAXIMUM (56-57)	UNITS (58-59)	MINIMUM (60-61)	AVERAGE (62-63)	MAXIMUM (64-65)			
Flow	Sample Measurement	0.037	0.195	MGD	*	*	*	*	DAILY	CONT
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	DAILY	CONT
Suspended Solids	Sample Measurement	*	*	*	*	4.2	4.9	0	1/7	2 HR 2 HOUR COMPOSITE
	Permit Requirement	*	*	*	*	30	100	MG/L	1/WEEK	COMPOSITE
Oil and Grease	Sample Measurement	*	*	*	*	25.0	25.0	0	1/7	GRAB
	Permit Requirement	*	*	*	*	15	20	MG/L	1/WEEK	GRAB
Hydrazine	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	1/WEEK	GRAB
Ammonia	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	1/WEEK	GRAB
pH	Sample Measurement	*	*	*	7.28	*	7.57	0	1/7	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	1/WEEK	GRAB
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.
* HYDRAZINE AND AMMONIA MONITORING ONLY APPLY DURING CONDITIONS OF WET LAY-UP PLANT WAS NOT IN WET LAY-UP IN MARCH 2002.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 PERMIT NUMBER
(17-19) 301 DISCHARGE NUMBER

No Discharge

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

FROM

YEAR MO DAY
02 03 01
(20-21) (22-23) (24-25)

TO YEAR MO DAY
02 03 31
(26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)	Sample Measurement / Permit Requirement	(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow		MONITOR AND REPORT			MGD	*	*	*	*	1/WEEK ESTIMATE
Suspended Solids		*	*	*	*	30	100	MG/L	*	2/MONTH GRAB
Oil and Grease		*	*	*	*	15	20	MG/L	*	2/MONTH GRAB
		*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*
		*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOSEPH W. VENZON
CHEMIST/ MANAGER
TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
724 682-5113
AREA CODE NUMBER

DATE
02 04 25
YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

Facility Name / Location

DISCHARGE MONITORING REPORT (DMR)

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			401				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	*	*	MGD	*	*	*	*	1/WEEK	ESTIMATE
	Permit Requirement	MONITOR AND REPORT			*	*	*	*		
Suspended Solids	Sample Measurement	*	*	*	*	30	100	MGL	2/MONTH	GRAB
	Permit Requirement	*	*	*	*					
Oil and Grease	Sample Measurement	*	*	*	*	15	20	MGL	2/MONTH	GRAB
	Permit Requirement	*	*	*	*					
pH	Sample Measurement	*	*	*	6.0	*	*	S.U.	2/MONTH	GRAB
	Permit Requirement	*	*	*	*					
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Vepron Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			AREA CODE: 216 NUMBER: 682-5113	YEAR: 02 MO: 04 DAY: 25

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

Facility Name / Location

DISCHARGE MONITORING REPORT (DMR)

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			501				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No DISCHARGE

NOTE: Read instructions before completing this form

Parameter (32-37)		QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
Total Suspended Solids	Sample Measurement	*	*		*	30	100	MG/L	*	1/WEEK
	Permit Requirement	*	*	*	*				*	GRAB
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*		*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Joseph W. Venables
 CHEMISTRY MANAGER
 TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
	724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

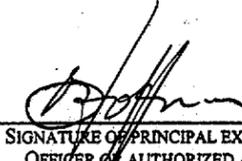
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16) PA0025615 PERMIT NUMBER			(17-19) 002 DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	20.001	20.001		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. WENZON CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 (17-19) 102
PERMIT NUMBER DISCHARGE NUMBER

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
02 03 01 02 03 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
Flow	Sample Measurement	40.001	40.001		*	*	*		2/31	EST	
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*		2/MONTH	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	44.0	44.0	MG/L	0	2/31	GRAB
	Permit Requirement	*	*		*	30	100		*	2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*		*	45.0	45.0	MG/L	0	2/31	GRAB
	Permit Requirement	*	*		*	15	20		*	2/MONTH	GRAB
pH	Sample Measurement	*	*		7.54	*	7.92		0	2/31	GRAB
	Permit Requirement	*	*		6.0	*	9.0	S.U.	*	2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*		*	*	*		*	*	
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*		*	*	*		*	*	
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*		*	*	*		*	*	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 (17-19) 003
PERMIT NUMBER DISCHARGE NUMBER

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

FROM

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
02 03 01 02 03 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)	Sample Measurement / Permit Requirement	(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow		0.086	0.228	MGD	*	*	*		2/31	EST
		MONITOR AND REPORT			*	*	*		2/MONTH	ESTIMATE
Iron		*	*	*	*	0.58	0.80		2/31	GRAB
		MONITOR AND REPORT			*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Aluminum		*	*	*	*	0.80	0.87		2/31	GRAB
		MONITOR AND REPORT			*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Phenols		*	*	*	*	20.01	20.01		2/31	GRAB
		MONITOR AND REPORT			*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Nitrate-Nitrite		*	*	*	*	6.5	7.0		2/31	GRAB
		MONITOR AND REPORT			*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Phosphorus		*	*	*	*	0.55	1.0		2/31	GRAB
		MONITOR AND REPORT			*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph W. Narzou
CHEMIST MANAGER
TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
724-682-5113
AREA CODE NUMBER

DATE
02 04 25
YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)			
PA0025615			103			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
Flow	Sample Measurement	0.057	0.153		*	*	*		3/31	MEAS	
	Permit Requirement	MONITOR AND REPORT						*	2/MONTH	ESTIMATE	
Suspended Solid	Sample Measurement	*	*		*	27.9	44.1		0	4/31	24 HR COMPOSITE
	Permit Requirement	*	*	*	*	30	100	MG/L	*	2/MONTH	COMPOSITE
pH	Sample Measurement	*	*		6.17	*	6.99		0	2/31	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	*	2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*		*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VERTON Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 03 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

PERMITTEE NAME ADDRESS (Include Facility Name / Location)

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

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

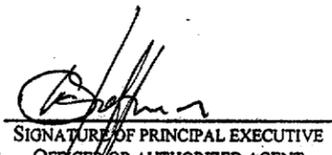
(2-16)			(17-19)			
PA0025615			203			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

FROM

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.010	0.09		*	*	*	0	1/7	MEAS
	Permit Requirement	0.023	*	MGD	*	*	*	*	1/WEEK	MEASURED
CBOD-5 Day	Sample Measurement	*	*		*	2.4	2.6	0	2/31	8 HR COMP
	Permit Requirement	*	*	*	*	25	50	*	2/MONTH	8 HOUR COMPOSITE
Suspended Solids	Sample Measurement	*	*		*	13.2	18.6	0	2/31	8 HR COMP
	Permit Requirement	*	*	*	*	30	60	*	2/MONTH	8 HOUR COMPOSITE
Total Residual Chlorine	Sample Measurement	*	*		*	0.39	0.49	0	2/31	GRAB
	Permit Requirement	*	*	*	*	1.4	INST MAX 3.3	*	2/MONTH	GRAB
Fecal Coliform May 1 to Sep 30 Oct 1 to Apr 30	Sample Measurement	*	*		*	37.5	53.0	0	2/31	GRAB
	Permit Requirement	*	*	*	*	200 2000	1000 *	*	2/MONTH	GRAB
pH	Sample Measurement	*	*		*	7.23	7.91	0	2/31	GRAB
	Permit Requirement	*	*	*	*	6.0	9.0	*	2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Varzow CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
			724 682-5113 AREA CODE NUMBER	02 YEAR	04 MO

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)			
PA0025615			303			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
Flow	Sample Measurement	0.09	0.056	MGD	*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	MGL	*	14.9	34.6	0	5/31	GRAB
	Permit Requirement	*	*		*	30	100	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*	MGL	*	LS.0	LS.0	0	1/7	GRAB
	Permit Requirement	*	*		*	15	20	*	1/WEEK	GRAB
pH	Sample Measurement	*	*	S.U.	7.37	*	7.74	0	1/7	GRAB
	Permit Requirement	*	*		*	6.0	9.0	*	1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Verzan</i> <i>CHEMIST MAJASCA</i> TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>[Signature]</i>	TELEPHONE	DATE	
			724-682-5113 AREA CODE NUMBER	02 YEAR	04 MO

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			403				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	*	*	MGD	*	*	*	*	1/WEEK	ESTIMATE
	Permit Requirement	MONITOR AND REPORT			*	*	*	*		
Suspended Solids	Sample Measurement	*	*	*	*	30	100	MG/L	1/WEEK	GRAB
	Permit Requirement	*	*	*	*					
Oil and Grease	Sample Measurement	*	*	*	*	15	20	MG/L	1/WEEK	GRAB
	Permit Requirement	*	*	*	*					
Hydrazine	Sample Measurement	*	*	*	NOT DETECTABLE USING ASTM D-1385			MG/L	1/WEEK	GRAB
	Permit Requirement	*	*	*	*					
Ammonia	Sample Measurement	*	*	*	*			MG/L	1/WEEK	GRAB
	Permit Requirement	*	*	*	MONITOR AND REPORT					
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.5	INSTANT MAX 1.25	MG/L	1/WEEK	GRAB
	Permit Requirement	*	*	*	*					
Clamrol (CT-1)	Sample Measurement	*	*	*	*			MG/L	WHEN DISCHARGE	24 HOUR COMPOSITE
	Permit Requirement	*	*	*	NOT DETECTABLE					

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph W. Venza
CHEMICAL MANAGER
TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

[Signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
774 682-5113
AREA CODE NUMBER

DATE
02 04 25
YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

PERMITTEE NAME ADDRESS (Include Facility Name / Location)

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

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16)			(17-19)				
PA0025615			403				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No DISCHARGE

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Betz DT-1	Sample Measurement	*	*		*	*				
	Permit Requirement	*	*	*	*	*	35.0	MG/L	*	WHEN DISCHARGE 24 HOUR COMPOSITE
pH	Sample Measurement	*	*			*				
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	*	1/WEEK GRAB
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Joseph W. Venen
 Chemist Manager
 TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

[Signature]
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 724 682-5113
 AREA CODE NUMBER

DATE
 02 04 25
 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

Facility Name / Location

DISCHARGE MONITORING REPORT (DMR)

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16)			(17-19)			
PA0025615			004			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

FROM

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
			AVERAGE	MAXIMUM	UNITS		MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	*				*	*	*	*			
	Permit Requirement		MONITOR AND REPORT				*	*	*	*	1/WEEK	MEASURED
Free Available Chlorine	Sample Measurement	*	*			*						
	Permit Requirement	*	*			*	AVG CONC 0.2	MAX CONC 0.5	MG/L	*	1/WEEK	GRAB
Total Residual Chlorine	Sample Measurement	*	*			*						
	Permit Requirement	*	*			*	0.5	1.25	MG/L	*	1/WEEK	GRAB
Iron	Sample Measurement	*	*			*						
	Permit Requirement	*	*			*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Aluminum	Sample Measurement	*	*			*						
	Permit Requirement	*	*			*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Phenols	Sample Measurement	*	*			*						
	Permit Requirement	*	*			*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Chromium	Sample Measurement	*	*			*						
	Permit Requirement	*	*			*	0.2	0.2	mg/l	*	2/YEAR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 JOSEPH W. KENZON
 CHEMISTRY MANAGER
 TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

[Signature]
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 724 682-5113
 AREA CODE NUMBER

DATE
 02 04 25
 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

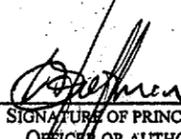
FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16) PA0025615 PERMIT NUMBER			(17-19) 004 (CONT) DISCHARGE NUMBER								
MONITORING PERIOD											
YEAR	MO	DAY	TO	YEAR	MO	DAY					
02	03	01		02	03	31					
(20-21)		(22-23)		(24-25)		(26-27)		(28-29)		(30-31)	

No Discharge

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Zinc	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	1.0	1.0	MG/L	*	2/YEAR
pH	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	*	1/WEEK
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>Joseph W. Jensen</u> CHEMIST MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

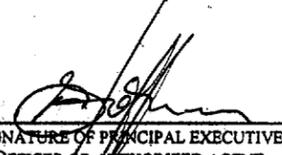
FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16) PA0025615 PERMIT NUMBER			(17-19) 006 DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	08	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (54-61)	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*		1/WEEK ESTIMATE
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venzoni</i> CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

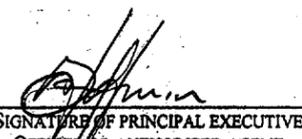
FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)			
PA0025615			007			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
			AVERAGE	MAXIMUM	UNITS		MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	*				*	*	*	*			
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	*		1/WEEK	ESTIMATE
Free Available Chlorine	Sample Measurement	*	*		*				*			
	Permit Requirement	*	*	*	*	0.2 AVG CONC	0.5 MAX CONC	MG/L	*		1/WEEK	GRAB
Total Residual Chlorine	Sample Measurement	*	*		*				*			
	Permit Requirement	*	*	*	*	0.5	1.25	MG/L	*		1/WEEK	GRAB
pH	Sample Measurement	*	*		*				*			
	Permit Requirement	*	*	*	*	6.0	9.0	S.U.	*		1/WEEK	GRAB
	Sample Measurement	*	*		*				*			
	Permit Requirement	*	*	*	*				*			
	Sample Measurement	*	*		*				*			
	Permit Requirement	*	*	*	*				*			
	Sample Measurement	*	*		*				*			
	Permit Requirement	*	*	*	*				*			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Vernon Chemistry Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

Facility Name / Location)

DISCHARGE MONITORING REPORT (DMR)

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			008				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	20.001	20.001	MGD	*	*	*	*	1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	*	*	5.5	6.9	0	2/31	GRAB
	Permit Requirement	*	*	*	*	30	100	*	2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*	*	*	25.0	25.0	0	2/31	GRAB
	Permit Requirement	*	*	*	*	15	20	*	2/MONTH	GRAB
Ammonia	Sample Measurement	*	*	*	*	20.10	20.10	*	2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		*	2/MONTH	GRAB
Iron, tot	Sample Measurement	*	*	*	*	0.91	1.1	*	2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		*	2/MONTH	GRAB
Aluminum	Sample Measurement	*	*	*	*	0.11	0.12	*	2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		*	2/MONTH	GRAB
Manganese	Sample Measurement	*	*	*	*	0.10	0.10	*	2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		*	2/MONTH	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				TELEPHONE		DATE		
JOSEPH W. VENEON CHEMISTRY MANAGER TYPE OR PRINT						724 682-5113		02 04 25 YEAR MO DAY		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER						

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

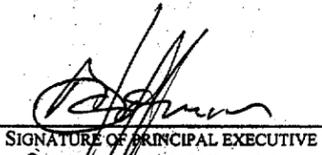
NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			008 (CONT)				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Phenols	Sample Measurement	*	*	*	*	20.01	20.01		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Zinc	Sample Measurement	*	*	*	*	0.07	0.09		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Color	Sample Measurement	*	*	*	*	85	136		7/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		UNITS	2/MONTH	GRAB
pH	Sample Measurement	*	*	*	7.65	*	7.91	0	2/31	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	2/MONTH	GRAB
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 01 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

Facility Name / Location

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

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

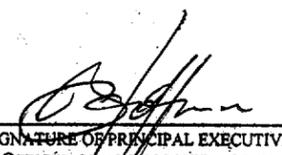
FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			110				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENEZON CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 YEAR

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

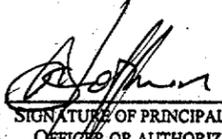
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			010				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
Flow	Sample Measurement	1.94	2.88	MGD	*	*	*	0	1/7	MEAS
	Permit Requirement	MONITOR AND REPORT			*	*	*			
Free Available Chlorine	Sample Measurement	*	*	*	*	0.0	0.0	0	1/7	GRAB
	Permit Requirement				*	AVG CONC 0.2	MAX CONC 0.5			
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.0	0.0	0	1/7	GRAB
	Permit Requirement				*	0.5	1.25			
Clamtrol CT-1	Sample Measurement	*	*	*	*	*	*	0	*	*
	Permit Requirement				*	NOT DETECTABLE				
Betz DT-1	Sample Measurement	*	*	*	*	*	*	0	*	*
	Permit Requirement				*	35.0				
pH	Sample Measurement	*	*	*	7.58	*	7.77	0	1/7	GRAB
	Permit Requirement				6.0	*	9.0			
	Sample Measurement	*	*	*	*	*	*	0	*	*
	Permit Requirement				*	*	*			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENZON CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
			AREA CODE NUMBER 24682-5113	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

* NO CLAMTROL (CT-1) APPLICATION WAS COMPLETED IN MARCH 2002.

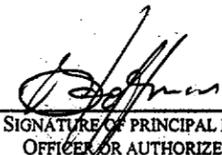
NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 PERMIT NUMBER	(17-19) 011 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 02 03 01 (20-21) (22-23) (24-25)	YEAR MO DAY 02 03 31 (26-27) (28-29) (30-31)

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.004	0.004		*	*	*		17	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*		1/WEEK
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*		*	*	*		*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>Joseph W. Venzon</u> <u>Chemistry Manager</u> TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)			
PA0025615			111			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.002	0.002		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT						*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	24.0	24.0	0	1/7	GRAB
	Permit Requirement	*	*		*	30	100		1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	25.0	25.0	0	1/7	GRAB
	Permit Requirement	*	*		*	15	20		1/WEEK	GRAB
pH	Sample Measurement	*	*		7.23	*	7.68	0	1/7	GRAB
	Permit Requirement	*	*		6.0	*	9.0		1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venzal</i> CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE			
			724 682-5113	02	03	25	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

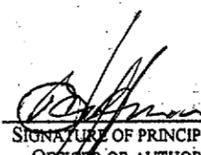
NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16)			(17-19)				
PA0025615			211				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
Flow	Sample Measurement	0.002	0.002		*	*	*		1/1	EST	
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*		1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	12.3	14.4		0	1/1	GRAB
	Permit Requirement	*	*		*	30	100	MG/L	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	15.0	15.0		0	1/1	GRAB
	Permit Requirement	*	*		*	15	20	MG/L	*	1/WEEK	GRAB
pH	Sample Measurement	*	*		7.44	*	7.71		0	1/1	GRAB
	Permit Requirement	*	*		6.0	*	9.0	S.U.	*	1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*		*	*	*		*	*	
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*		*	*	*		*	*	
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*		*	*	*		*	*	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venezia</i> Chemist Manager TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
			24682-5113 AREA CODE NUMBER	02 YEAR	04 MO

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

FACILITY NAME / LOCATION

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

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16)			(17-19)				
PA0025615			012				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

NOTE: Read instructions before completing this form

Parameter (32-37)	Sample Measurement / Permit Requirement	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
Flow	Sample Measurement	40.001	40.001		*	*	*		1/31	EST	
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/MONTH	ESTIMATE	
Total Dissolved Solids	Sample Measurement	*	*		*	794	968		1/7	GRAB	
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	1/WEEK	GRAB
Chromium	Sample Measurement	*	*		*	0.003	0.003		0	1/7	GRAB
	Permit Requirement	*	*	*	*	0.2	0.2	MG/L	*	1/WEEK	GRAB
Zinc	Sample Measurement	*	*		*	4.9	5.3		4*	1/7	GRAB
	Permit Requirement	*	*	*	*	1.0	1.0	MG/L	*	1/WEEK	GRAB
Copper	Sample Measurement	*	*		*	0.11	0.11			1/7	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	1/WEEK	GRAB
pH	Sample Measurement	*	*		*	8.64	8.64		0	1/31	GRAB
	Permit Requirement	*	*	*	*	6.0	9.0	S.U.	*	1/MONTH	GRAB
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*	*	*	*	*	*	*	*	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph W. Venzon
Chemistry Manager
TYPE OR PRINT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
[Signature]

TELEPHONE
724 682-5113
AREA CODE NUMBER

DATE
02 04 25
YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.
* PER AGREEMENT WITH DEP SEE ATTACHED LETTER FOR EXPLANATION OF EXCURSION

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16)			(17-19)			
PA0025615			013			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

FROM

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-55)	MAXIMUM (56-57)	UNITS (58-59)	MINIMUM (60-61)	AVERAGE (62-63)	MAXIMUM (64-65)			
Flow	Sample Measurement	0.021	0.042		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*		1/WEEK	ESTIMATE
Total Residual Chlorine	Sample Measurement	*	*		*	0.11	0.18	0	2/31	CALC
	Permit Requirement	*	*	*	*	0.5	1.25	*	2/MONTH	CALCULATE
Copper	Sample Measurement	*	*		*	0.04	0.10		1/7	CALC
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		*	1/WEEK	CALCULATE
Chlorobenzene	Sample Measurement	*	*		*	10.005	10.005		2/90	CALC
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		*	2/QUARTER	CALCULATE
Temperature	Sample Measurement	*	75		*	*	*	0	1/7	GRAB
	Permit Requirement	*	110	°F	*	*	*	*	1/WEEK	GRAB (i-s)
Cyanide, tot	Sample Measurement	*	*		*	10.01	10.01		2/31	CALC
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		S.U.	2/MONTH	CALCULATE
pH	Sample Measurement	*	*		7.04	*	7.79	0	1/7	CALC
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	1/WEEK	CALCULATE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VENZON CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
			724 682-5113 AREA CODE NUMBER	02 YEAR	04 MO

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

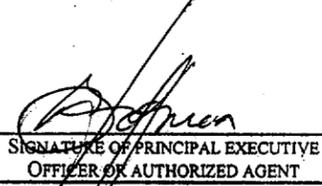
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)			
PA0025615			113			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	03	01		02	03	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.018	*	MGD	*	*	*	0	1/7	MEAS
	Permit Requirement	0.043	*		*	*	*	*	*	1/WEEK
CBOD-5 Day	Sample Measurement	*	*	*	*	22.0	22.0	0	2/31	8 HR COMP COMPOSITE
	Permit Requirement	*	*		*	*	25	50	*	2/MONTH
Suspended Solids	Sample Measurement	*	*	*	*	5.2	5.6	0	2/31	8 HR COMP COMPOSITE
	Permit Requirement	*	*		*	*	30	60	*	2/MONTH
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.13	0.20	0	2/31	GRAB
	Permit Requirement	*	*		*	*	1.4	INST MAX 3.3	*	2/MONTH
Fecal Coliform May 1 to Oct 31 Nov 1 to Apr 30	Sample Measurement	*	*	*	*	3.5	5.0	0	2/31	GRAB
	Permit Requirement	*	*		*	*	200	1000	*	2/MONTH
pH	Sample Measurement	*	*	*	7.53	*	7.93	0	2/31	GRAB
	Permit Requirement	*	*		*	6.0	*	9.0	*	2/MONTH
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Uenzel CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5133 AREA CODE NUMBER	02 03 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

(2-16) PA0025615 PERMIT NUMBER
(17-19) 213 DISCHARGE NUMBER

No Discharge

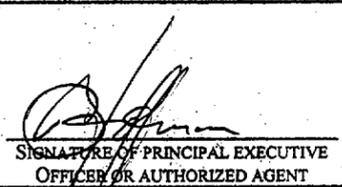
FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

FROM

MONITORING PERIOD			TO		
YEAR	MO	DAY	YEAR	MO	DAY
02	03	01	02	03	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
			AVERAGE	MAXIMUM	UNITS		MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement					*	*	*				
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	*	1/WEEK	ESTIMATE	
Suspended Solids	Sample Measurement	*	*		*							
	Permit Requirement	*	*	*	*	30	100	MGL	*	2/MONTH	GRAB	
Oil and Grease	Sample Measurement	*	*		*							
	Permit Requirement	*	*	*	*	15	20	MGL	*	2/MONTH	GRAB	
pH	Sample Measurement	*	*		*							
	Permit Requirement	*	*	*	*	6.0	9.0	S.U.	*	2/MONTH	GRAB	
	Sample Measurement	*	*		*							
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	
	Sample Measurement	*	*		*							
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	
	Sample Measurement	*	*		*							
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>Joseph W. Venzon</u> CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE	
			724 682-5113 AREA CODE NUMBER	02 YEAR	04 MO

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

Facility Name / Location

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

NAME: First Energy Nuclear Operating Company
ADDRESS: 76 South Main Street
Akron, OH 44308

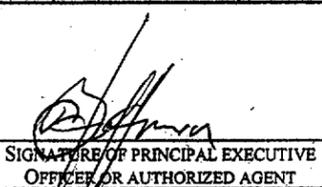
(2-16) PA0025615 (17-19) 313
PERMIT NUMBER DISCHARGE NUMBER

FACILITY: Beaver Valley Power Station
LOCATION: Shippingport Borough, Beaver County

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
02 03 01 02 03 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
Flow	Sample Measurement	0.002	0.002		*	*	*		1/7	EST	
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*		ESTIMATE	
Suspended Solids	Sample Measurement	*	*		*	5.5	7.2		0	1/7	GRAB
	Permit Requirement	*	*	*	*	30	100	MGL	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	LS.0	LS.0		0	1/7	GRAB
	Permit Requirement	*	*	*	*	15	20	MGL	*	1/WEEK	GRAB
pH	Sample Measurement	*	*		7.15	*	7.40		0	1/7	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	*	1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*	*	*	*	*		*	*	
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*	*	*	*	*		*	*	
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*	*	*	*	*		*	*	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzon CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

FACILITY: Beaver Valley Power Station
 LOCATION: Shippingport Borough, Beaver County

(2-16)			(17-19)				
PA0025615			413				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	03	01		02	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	40.001	40.001		*	*	*		1/2	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	4.0	4.0	0	2/31 *	GRAB
	Permit Requirement	*	*	*	*	30	100	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	45.0	45.0	0	2/31 *	GRAB
	Permit Requirement	*	*	*	*	15	20	*	1/WEEK	GRAB
pH	Sample Measurement	*	*		7.34	*	7.64	0	2/31 *	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0	*	1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. UENZEL CHEMISTRY MANAGER TYPE OR PRINT	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 04 25 YEAR MO DAY

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

NOTE: YOUR PERMIT WILL EXPIRE ON DECEMBER 27, 2006. PLEASE SUBMIT YOUR RENEWAL APPLICATION BY JUNE 30, 2006.

* DISCHARGE OCCURRED IN ONLY 2 WEEKS IN MARCH 2002.