



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

June 26, 2002
L-02-073

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 May 2002 as submitted to the Pennsylvania Department of Environmental Protection.

Sincerely,

Joseph W. Venzon
Chemistry and
Environmental Manager

DJS

C: J.W. Venzon
Licensing File

JE25

DISCHARGE MONITORING REPORT SUPPLEMENTAL SEWAGE SLUDGE REPORT

Month: May 2002
Year: _____

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 2

SLUDGE PRODUCTION INFORMATION (prior to incineration)

HAULED AS LIQUID SLUDGE				HAULED AS DEWATERED SLUDGE			
(Gallons)	X (% Solids)	X (Conversion Factor)	= Dry Tons	(Tons of Dewatered Sludge)	X (% Solids)	X (.01)	= Dry Tons
19,000	DSS 0.220	.0000417	1.58			.01	
TOTAL			= 1.58	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:		1.58		
Type: (check one)				
Landfill				
Agr. Utilization				
Other (specify)				
County:	Beaver	Beaver		

(SSR-1 3/21/91)

Donald Delera For JNV
Signature Title
6-28-02 Date
(724) 682-5113 Telephone

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

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

(2-16)			(17-19)				
PA0025615			101				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	0.0016	0.0080		*	*	*		DAILY	CONT
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	DAILY	CONT
Suspended Solids	Sample Measurement	*	*		*	24.0	24.0	0	1/7	2 HR COMP
	Permit Requirement	*	*	*	*	30	100	MG/L	1/WEEK	2 HOUR COMPOSITE
Oil and Grease	Sample Measurement	*	*		*	15.0	15.0	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	*	*		6.63	*	6.98	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. Varian 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 724 682-5113 AREA CODE NUMBER	DATE 02 06 26 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 IS ONLY REQUIRED DURING WET-LAY UP CONDITIONS. PLANT WAS NOT IN WET LAY-UP IN MAY 2002.

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

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

(2-16)			(17-19)				
PA0025615			301				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	20.001	20.001	MGD	*	*	*		2/31*	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*		1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	MG/L	*	24.0	24.0	0	2/31	GRAB
	Permit Requirement	*	*		30	100	*		2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*	MG/L	*	25.0	25.0	0	2/31	GRAB
	Permit Requirement	*	*		15	20	*		2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	TELEPHONE	DATE
Joseph W. Venezia CHEMISTRY MANAGER TYPE OR PRINT	Donald J. Sabera FOR JNV	724 682-5113	02 06 26 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.

* DISCHARGE OCCURRED IN ONLY 2 OF THE WEEKS IN MAY 2002.

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			401			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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	MGD	*	*	*	*	1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	*	*	24.0	24.0	0	2/31	GRAB
	Permit Requirement	*	*		*	30	100	MG/L	*	2/MONTH
Oil and Grease	Sample Measurement	*	*	*	*	25.0	25.0	0	2/31	GRAB
	Permit Requirement	*	*		*	15	20	MG/L	*	2/MONTH
pH	Sample Measurement	*	*	*	8.25	*	*	0	2/31	GRAB
	Permit Requirement	*	*		*	6.0	*	*	S.U.	2/MONTH
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. KENZER 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 724 682-5113	DATE 02 06 26 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			501				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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				UNITS
Flow	Sample Measurement				*	*	*				
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE	
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 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)	TELEPHONE 724 682-5113 AREA CODE NUMBER	DATE 02 06 26 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

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

(2-16)			(17-19)			
PA0025615			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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	31.5	45.3	MGD	*	*	*		DAILY	CONT
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	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
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.12	0.26	0	1/7	GRAB
	Permit Requirement	*	*		*	0.5	INSTANT MAX 1.25	MG/L	*	1/WEEK
Clamrol (CT-1)	Sample Measurement	*	*	*	*	*	*		*	*
	Permit Requirement	*	*		*	NOT DETECTABLE		MG/L	*	WHEN DISCHARG
Betz DT-1	Sample Measurement	*	*	*	*	*	*		*	*
	Permit Requirement	*	*		*	*	35.0	MG/L	*	WHEN DISCHARG
Chromium	Sample Measurement	*	*	*	*	*	*			
	Permit Requirement	*	*		*	0.2	0.2	MG/L	*	2/YEAR
Zinc	Sample Measurement	*	*	*	*	*	*			
	Permit Requirement	*	*		*	1.0	1.0	MG/L	*	2/YEAR
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 3 years)					TELEPHONE		DATE		
Joseph W. Venezia CHEMISTRY MANAGER TYPE OR PRINT						Donald Stalera for JWR SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		724 682-5113 AREA CODE NUMBER		02 06 26 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 CT-1 CLAMICIDE APPLICATIONS WERE DONE IN MAY 2002, NO DISCHARGE OF CT-1 OCCURRED.

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

(2-16)			(17-19)				
PA0025615			001 (CONT)				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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			(4 Card Only)	QUALITY OR CONCENTRATION			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		(46-53)	(54-61)	UNITS	(38-45)	(46-53)	(54-61)	UNITS				
		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	*	*		LO.01	LO.01	LO.01		*	2/31	GRAB	
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	2/MONTH	GRAB	
Iron	Sample Measurement	*	*		*	3.7	4.3		*	2/31	GRAB	
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	2/MONTH	GRAB	
Aluminum	Sample Measurement	*	*		3.5	5.1	6.7		*	2/31	GRAB	
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	2/MONTH	GRAB	
pH	Sample Measurement	*	*		8.11	*	8.30		0	1/1	GRAB	
	Permit Requirement	*	*	*	6.0		9.0	S.U.	*	1WEEK	GRAB	
	Sample Measurement	*	*		*	*	*		*	*	*	
	Permit Requirement	*	*	*	*	*	*		*	*	*	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venzou 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 Donald Salera For JWP	TELEPHONE	DATE
			724 682-5113	02 06 26 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 REQUIRED DURING WET LAY-UP. PLANT WAS NOT IN WET LAY-UP IN MAY 2002.

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

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

(2-16)			(17-19)				
PA0025615			102				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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 (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			*	*	*	*	2/MONTH	ESTIMATE
Suspended Solids	Sample Measurement	*	*	*	*	12.4	14.3	0	2/31	GRAB
	Permit Requirement	*	*		*	*	30	100	MG/L	2/MONTH
Oil and Grease	Sample Measurement	*	*	*	*	45.0	45.0	0	2/31	GRAB
	Permit Requirement	*	*		*	*	15	20	MG/L	2/MONTH
pH	Sample Measurement	*	*	*	7.38	*	7.59	0	2/31	GRAB
	Permit Requirement	*	*		*	6.0	*	9.0	S.U.	2/MONTH
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venzan</i> <i>Chemistry Manager</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>Donald J. Salera</i> <i>PER JUV</i>	TELEPHONE	DATE
			724 682-5113	02 / 06 / 26 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			002			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FROM

TO

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	0.006	0.046		*	*	*		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	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. VERNON CHEMISTRY MANAGER TYPE OR PRINT	Donald J. Salera FOR JWV SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	724 682-5113 AREA CODE NUMBER	02 06 26 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.



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

June 26, 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 103

Dear Sir or Madam:

During the month of May 2002, Outfall 103 (Clarifier Settling Basin) exceeded the monthly minimum pH effluent limit of 6.0. The pH was determined to be 5.79 S.U. on May 12, 2002.

The clarifier settling basin receives reverse osmosis reject water from our raw water treatment vendor. The reject water is normally maintained between pH 6.0 to 6.2 to ensure scaling of the reverse osmosis membrane is minimized. On the day of the event, the pH of the reject water was measured at 5.0 S.U. Because of the low pH of the reject water, the clarifier settling basin pH exceeded minimum pH effluent limitations.

The water treatment vendor was immediately notified and reject water discharge to the clarifier settling basin was terminated. The clarifier settling basin was resampled on May 13, 2002 and the pH was within permit effluent limits.

Beaver Valley Power Station now monitors the reject water from the water treatment vendor on a daily basis. If reject water falls below pH of 6.0, the discharge is terminated.

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
Central File

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

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	05	01		02	05	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)				UNITS
Flow	Sample Measurement	0.025	0.061		*	*	*		3/31	MEAS	
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	2/MONTH	ESTIMATE	
Suspended Solid	Sample Measurement	*	*		*	18.1	19.7		2/31	24 HR COMP	
	Permit Requirement	*	*	*	*	30	100	MG/L	2/MONTH	24 HOUR COMPOSITE	
pH	Sample Measurement	*	*		5.79	*	6.89		1*	3/31	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 <i>Joseph W. Newton</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>Donald Salera</i> For JWN SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 06 26 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.

* SEE ATTACHED LETTER FOR EXPLANATION OF EXCURSION

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	TO
YEAR MO DAY	YEAR MO DAY
02 05 01	02 05 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	0.0014	*	MGD	*	*	*	0	1/1	MEAS
	Permit Requirement	0.023	*		*	*	*	*	*	1/WEEK
CBOD-5 Day	Sample Measurement	*	*	*	*	2.6	3.2	0	2/31	8 HR COMP
	Permit Requirement	*	*		*	*	25	50	*	2/MONTH
Suspended Solids	Sample Measurement	*	*	*	*	11.9	16.5	0	2/31	8 HR COMP
	Permit Requirement	*	*		*	*	30	60	*	2/MONTH
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.52	0.55	0	2/31	GRAB
	Permit Requirement	*	*		*	*	1.4	INST MAX 3.3	*	2/MONTH
Fecal Coliform May 1 to Sep 30 Oct 1 to Apr 30	Sample Measurement	*	*	*	*	0.0	0.0	0	2/31	GRAB
	Permit Requirement	*	*		*	*	200 2000	1000 *	*	2/MONTH
pH	Sample Measurement	*	*	*	7.87	*	7.89	0	2/31	GRAB
	Permit Requirement	*	*		*	6.0	*	9.0	*	2/MONTH
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venezia 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 214 682-5113	DATE	
			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Donald J. Salera FOR JWR	AREA CODE NUMBER 214 682-5113

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			303				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	0.019	0.056	MGD	*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	*	*	14.2	25.6	0	1/7	GRAB
	Permit Requirement	*	*		*	*	30	100	*	1/WEEK
Oil and Grease	Sample Measurement	*	*	*	*	45.0	5.0	0	1/7	GRAB
	Permit Requirement	*	*		*	*	15	20	*	1/WEEK
pH	Sample Measurement	*	*	*	7.12	*	7.43	0	1/7	GRAB
	Permit Requirement	*	*		*	6.0	*	9.0	*	1/WEEK
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	TELEPHONE	DATE
JOSEPH W. UNGER CHEMISTRY MANAGER TYPE OR PRINT	<i>Donald Salera</i> FOR J.W.U.	DA 682-5113	02 / 06 / 26 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.

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

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	05	01		02	05	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						*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	30	100	MG/L	*	1/WEEK
Oil and Grease	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	15	20	MG/L	*	1/WEEK
Hydrazine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	NOT DETECTABLE USING ASTM D-1385			MG/L	*	1/WEEK
Ammonia	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	1/WEEK
Total Residual Chlorine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	0.5	INSTANT-MAX 1.25	MG/L	*	1/WEEK
Clamrol (CT-1)	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	NOT DETECTABLE		MG/L	*	WHEN DISCHARGE

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)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Donald J. Salera FOR JWR	TELEPHONE	DATE
			724 682-5113	02 06 26 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

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	05	01		02	05	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			
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	*	*	*	*	*		*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Gonzalez</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>Joseph W. Gonzalez</i>	TELEPHONE	DATE	
			724 682-5113 AREA CODE NUMBER	02 YEAR	06 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.

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			003			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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	0.045	0.122		*	*	*		2/31	EST
	Permit Requirement	MONITOR AND REPORT						*	2/MONTH	ESTIMATE
Iron	Sample Measurement	*	*		*	0.79	1.0		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Aluminum	Sample Measurement	*	*		*	1.2	2.0		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Phenols	Sample Measurement	*	*		*	40.01	40.01		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Nitrate-Nitrite	Sample Measurement	*	*		*	12.5	13.0		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Phosphorus	Sample Measurement	*	*		*	0.85	1.0		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	*		*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venzon</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>Donald Salera</i> for JWR SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 06 26 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	004
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
YEAR MO DAY	YEAR MO DAY
02 05 01	02 05 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	2.8	7.7		*	*	*		1/31*	MEAS
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	MEASURED
Free Available Chlorine	Sample Measurement	*	*		*	0.0	0.0	0	1/31*	GRAB
	Permit Requirement	*	*	*	*	AVG CONC 0.2	MAX CONC 0.5	MG/L	1/WEEK	GRAB
Total Residual Chlorine	Sample Measurement	*	*		*	0.04	0.04	0	1/31*	GRAB
	Permit Requirement	*	*	*	*	0.5	1.25	MG/L	1/WEEK	GRAB
Iron	Sample Measurement	*	*		*	0.89	*		1/31*	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Aluminum	Sample Measurement	*	*		*	0.55	0.55		2/31*	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Phenols	Sample Measurement	*	*		*	10.01	10.01		1/31*	GRAB
	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 <u>Joseph W. Venzou</u> <u>Chemical 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)	TELEPHONE <u>74 682-513</u> AREA CODE NUMBER	DATE	
			<u>02</u> YEAR	<u>06</u> MO <u>26</u> DAY
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <u>Donald J. Stalera</u> <u>for JWV</u>				

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 1 WEEK IN MAY 2002.

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			006			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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 (46-53)			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				*	*	*			
	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	*	*	*	*	*	*	*	*	*

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)	<i>Donald Salera</i> FOR JWR 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.

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

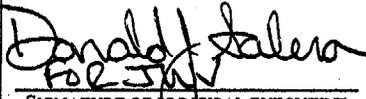
(2-16)			(17-19)				
PA0025615			007				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT						*	1/WEEK	ESTIMATE
Free Available Chlorine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	0.2 AVG CONC	0.5 MAX CONC		1/WEEK	GRAB
Total Residual Chlorine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	0.5	1.25		1/WEEK	GRAB
pH	Sample Measurement	*	*							
	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. NEUBAU 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	02	06	26	
			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.

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

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	05	01		02	05	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		*	*	*		1/7	EST	
	Permit Requirement	MONITOR AND REPORT						*	1/WEEK	ESTIMATE	
Suspended Solids	Sample Measurement	*	*		*	13.4	14.7		0	2/31	GRAB
	Permit Requirement	*	*	*	*	30	100	MG/L	*	2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*		*	9.0	12.0		0	2/31	GRAB
	Permit Requirement	*	*	*	*	15	20	MG/L	*	2/MONTH	GRAB
Ammonia	Sample Measurement	*	*		*	40.1	40.1			2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Iron, tot	Sample Measurement	*	*		*	1.2	1.3			2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Aluminum	Sample Measurement	*	*		*	0.22	0.22			2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Manganese	Sample Measurement	*	*		*	0.95	1.0			2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	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. VANCE CHEMISTRY MANAGER TYPE OR PRINT	DONALD J. SALERA FOR J.W.V.						724 682-5113		02	06	26
	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.

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			110			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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

TO

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 (38-45)	AVERAGE (46-53)	MAXIMUM			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	I/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. 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)

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

TELEPHONE
 724 682-5113
 AREA CODE NUMBER

DATE
 02 06 26
 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

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	05	01		02	05	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	MEASURED
Free Available Chlorine	Sample Measurement	*	*		*	0.0	0.0	0	1/7	GRAB
	Permit Requirement	*	*	*	*	AVG CONC 0.2	MAX CONC 0.5	MGL	1/WEEK	GRABWHILE CHLORO
Total Residual Chlorine	Sample Measurement	*	*		*	0.0	0.0	0	1/7	GRAB
	Permit Requirement	*	*	*	*	0.5	1.25	MGL	1/WEEK	GRABWHILE CHLORO
Clamtrol CT-1	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	NOT DETECTABLE		MGL	WHEN DISCHARG	24 HOUR COMPOSITE
Betz DT-1	Sample Measurement	*	*		*	*	*		*	*
	Permit Requirement	*	*	*	*	*	35.0	MGL	WHEN DISCHARG	24 HOUR COMPOSITE
pH	Sample Measurement	*	*		7.50	*	7.87	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. 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)	<i>Donald Salera</i> for JWC SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 06 26 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 CT-1 WAS APPLIED FOR ASIATIC CLAM CONTROL DURING THE MONTH OF MAY 2002.
 NO DISCHARGE OF CT-1 OCCURRED

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	111
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
FROM YEAR MO DAY TO YEAR MO DAY	
02 05 01	02 05 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 (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
Flow	Sample Measurement	0.002	0.002		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	4.0	4.0	0	1/7	GRAB
	Permit Requirement	*	*	*	*	30	100	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	15.0	15.0	0	1/7	GRAB
	Permit Requirement	*	*	*	*	15	20	*	1/WEEK	GRAB
pH	Sample Measurement	*	*		*	6.61	7.25	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 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. VENZON CHEMISTRY MANAGER TYPE OR PRINT	<i>Donald Salera</i> FOR JURY SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	724 682-5113 AREA CODE NUMBER	02 06 26 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)

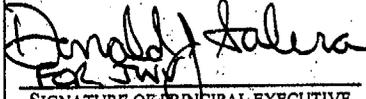
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

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

(2-16)			(17-19)			
PA0025615			211			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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	MGD	*	*	*		1/7	Est
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	MG/L	*	7.2	13.4	0	1/7	Grab
	Permit Requirement	*	*		*	30	100	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*	MG/L	*	25.0	25.0	0	1/7	Grab
	Permit Requirement	*	*		*	15	20	*	1/WEEK	GRAB
pH	Sample Measurement	*	*	S.U.	6.94	*	7.30	0	1/7	Grab
	Permit Requirement	*	*		*	6.0	*	9.0	*	1/WEEK
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VANZAN 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)	 FOR J.W.V.	TELEPHONE	DATE
			724 682-5113	
		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.

PERMITTEE NAME ADDRESS (Include Facility Name / Location)

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

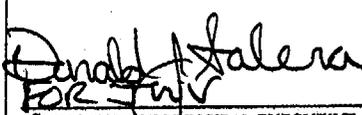
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

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

(2-16)			(17-19)				
PA0025615			011				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	0.004	0.004	MGD	*	*	*	*	1/7	EST
	Permit Requirement	MONITOR AND REPORT				*	*	*	*	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 Joseph W. Denszon 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)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE	
			AREA CODE	NUMBER	YEAR	MO
			724	682-5113	02	06 26

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

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

(2-16)			(17-19)			
PA0025615			012			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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) (69-70)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
Flow	Sample Measurement	20.001	20.001	MGD	*	*	*		1/31	EST	
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/MONTH	ESTIMATE	
Total Dissolved Solids	Sample Measurement	*	*	*	*	612	720		1/7	GRAB	
	Permit Requirement	MONITOR AND REPORT			*	MONITOR AND REPORT		MG/L	*	1/WEEK	GRAB
Chromium	Sample Measurement	*	*	*	*	20.0024	0.003		0	1/7	GRAB
	Permit Requirement	MONITOR AND REPORT			*	0.2	0.2	MG/L	*	1/WEEK	GRAB
Zinc	Sample Measurement	*	*	*	*	7.34	8.28		5*	1/7	GRAB
	Permit Requirement	MONITOR AND REPORT			*	1.0	1.0	MG/L	*	1/WEEK	GRAB
Copper	Sample Measurement	*	*	*	*	0.11	0.12			1/7	GRAB
	Permit Requirement	MONITOR AND REPORT			*	MONITOR AND REPORT		MG/L	*	1/WEEK	GRAB
pH	Sample Measurement	*	*	*	8.58	*	8.58		0	1/31	GRAB
	Permit Requirement	MONITOR AND REPORT			6.0	*	9.0	S.U.	*	1/MONTH	GRAB
	Sample Measurement	*	*	*	*	*	*		*	*	
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	*	*	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venzan</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 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 <i>Dorinda Salera</i> for JUV	TELEPHONE	DATE	
			AREA CODE NUMBER 724 682-5113	YEAR 02	MO 06

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.

* SEE ATTACHED LETTER FOR EXPLANATION OF EXCURSIONS.



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

June 26, 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

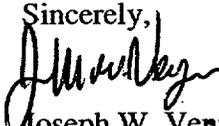
Dear Sir or Madam:

During the month of May 2002, 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 8.28 mg/L on May 8, 2002; 7.89 mg/L on May 12, 2002; 4.72 mg/L on May 23, 2002; and 7.8 mg/L on May 28, 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
Central File

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	113					
PERMIT NUMBER	DISCHARGE NUMBER					
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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	0.006	*	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
	Permit Requirement	*	*		*	25	50	*	*	2/MONTH
Suspended Solids	Sample Measurement	*	*	MG/L	*	18.7	25.8	0	2/31	8 HR COMP
	Permit Requirement	*	*		*	30	60	*	*	2/MONTH
Total Residual Chlorine	Sample Measurement	*	*	MG/L	*	0.20	0.24	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	*	*	#/100ML	*	11.1	14.0	0	2/31	GRAB
	Permit Requirement	*	*		*	200	1000	*	*	2/MONTH
pH	Sample Measurement	*	*	S.U.	7.52	*	7.66	0	2/31	GRAB
	Permit Requirement	*	*		*	6.0	*	9.0	*	2/MONTH
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	TELEPHONE	DATE			
			AREA CODE	NUMBER	YEAR	MO
Joseph W. Venezia Chemical Manager TYPE OR PRINT	Donald J. Stalera FOR JWR SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	724 682-5113		02	06	26

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			213				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	30	100	MG/L	2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	15	20	MG/L	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	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venezia</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>Donald J. Salera</i> Earl J. Juv	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.

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			313				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	0.002	0.002	MGD	*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	MG/L	*	4.3	5.3	0	1/7	GRAB
	Permit Requirement	*	*		*	30	100	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*	MG/L	*	45.0	45.0	0	1/7	GRAB
	Permit Requirement	*	*		*	15	20	*	1/WEEK	GRAB
pH	Sample Measurement	*	*	S.U.	6.88	*	7.37	0	1/7	GRAB
	Permit Requirement	*	*		*	6.0	*	9.0	*	1/WEEK
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venzon</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>Donald Salera</i>	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 06 26 YEAR MO DAY

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

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			413				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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				UNITS
Flow	Sample Measurement	20.001	20.001		*	*	*		1/7	EST	
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE	
Suspended Solids	Sample Measurement	*	*		*	9.2	22.4		0	1/7	GRAB
	Permit Requirement	*	*	*	*	30	100	MG/L	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	15.0	25.0		0	1/7	GRAB
	Permit Requirement	*	*	*	*	15	20	MG/L	*	1/WEEK	GRAB
pH	Sample Measurement	*	*		7.30	*	7.83		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. Venezia 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 Donald Stalera FOR J.W.V.	TELEPHONE	DATE	
			724 682-5113 AREA CODE NUMBER	02 YEAR	06 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.

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

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

(2-16)			(17-19)				
PA0025615			013				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	0.009	0.014	MGD	*	*	*	*	1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*		1/WEEK	ESTIMATE
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.10	0.19	0	2/31	CALC
	Permit Requirement	*	*		*	0.5	1.25	MG/L	*	2/MONTH
Copper	Sample Measurement	*	*	*	*	0.038	0.05A	*	1/7	CALC
	Permit Requirement	*	*		*	MONITOR AND REPORT			MG/L	*
Chlorobenzene	Sample Measurement	*	*	*	*			*		
	Permit Requirement	*	*		*	MONITOR AND REPORT			MG/L	*
Temperature	Sample Measurement	*	68	°F	*	*	*	*	1/7	GRAB
	Permit Requirement	*	110		*	*	*		*	1/WEEK
Cyanide, tot	Sample Measurement	*	*	*	*	20.02	20.02	*	2/31	CALC
	Permit Requirement	*	*		*	MONITOR AND REPORT			S.U.	*
pH	Sample Measurement	*	*	*	6.85	*	7.22	0	1/7	CALC
	Permit Requirement	*	*		*	6.0	*	9.0	S.U.	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VETZON 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 724 682-5113	DATE 02 06 26 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.



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

June 26, 2002
L-02-073

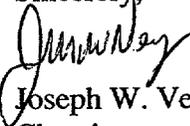
Document Control Desk
U.S. Nuclear Regulatory Commission
Washington, DC 20555

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 May 2002 as submitted to the Pennsylvania Department of Environmental Protection.

Sincerely,

Joseph W. Venzon
Chemistry and
Environmental Manager

DJS

C: J.W. Venzon
Licensing File

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

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

(2-16)			(17-19)				
PA0025615			101				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	6.0016	0.0080		*	*	*		DAILY	CONT
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	DAILY	CONT
Suspended Solids	Sample Measurement	*	*		*	4.0	4.0	0	1/7	2 HR Comp 2 HOUR COMPOSITE
	Permit Requirement	*	*	*	*	30	100	MG/L	1/WEEK	
Oil and Grease	Sample Measurement	*	*		*	15.0	15.0	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	*	*		6.63	*	6.98	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. Neuman 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 724 682-5113	DATE 02 06 26 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 IS ONLY REQUIRED DURING WET-LAY UP CONDITIONS. PLANT WAS NOT IN WET LAY-UP IN MAY 2002.

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			301		
PERMIT NUMBER			DISCHARGE NUMBER		
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
02	05	01	02	05	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

FROM

TO

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	20.001	20.001	MGD	*	*	*		2/31*	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*		1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	MG/L	*	24.0	24.0	0	2/31	GRAB
	Permit Requirement	*	*		*	30	100	*	2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*	MG/L	*	25.0	25.0	0	2/31	GRAB
	Permit Requirement	*	*		*	15	20	*	2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venzel</i> <i>Cremson Manager</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)	TELEPHONE <i>724 682-5113</i>	DATE <i>02 06 26</i> 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 OF THE WEEKS IN MAY 2002.

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

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	05	01		02	05	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	20.001	20.001	MGD	*	*	*	*	1/7	EST	
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE	
Suspended Solids	Sample Measurement	*	*	*	*	24.0	24.0	MG/L	0	2/31	GRAB
	Permit Requirement	*	*		*	*	30		100	*	2/MONTH
Oil and Grease	Sample Measurement	*	*	*	*	25.0	25.0	MG/L	0	2/31	GRAB
	Permit Requirement	*	*		*	*	15		20	*	2/MONTH
pH	Sample Measurement	*	*	*	8.25	*	*	S.U.	0	2/31	GRAB
	Permit Requirement	*	*		*	6.0	*		*	*	2/MONTH
	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 <i>Donald J. Stalera</i> FOR JNV	TELEPHONE	DATE	
			724-682-5113 AREA CODE NUMBER	02 YEAR	06 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.

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

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	05	01		02	05	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			(4 Card Only)	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		(46-53)	(54-61)				(38-45)	(46-53)	(54-61)			
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Flow	Sample Measurement				*	*	*					
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	*	*	1/WEEK	ESTIMATE
Total Suspended Solids	Sample Measurement	*	*		*							
	Permit Requirement	*	*	*	*	30	100	MG/L	*	*	1/WEEK	GRAB
	Sample Measurement	*	*		*	*	*		*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*		*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venzon</i> <i>Chemist Manager</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)	<i>Donald J. Salera</i> FOR JULY SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
			724 682-5113 AREA CODE NUMBER	02 YEAR	06 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.

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			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

FROM

TO

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	31.5	45.3		*	*	*		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
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.12	0.26	0	1/7	GRAB
	Permit Requirement	*	*	*	*	0.5	INSTANT MAX 1.25	MG/L	*	1/WEEK
Clamtrol (CT-1)	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	NOT DETECTABLE		MG/L	*	WHEN DISCHARG
Betz DT-1	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	35.0	MG/L	*	WHEN DISCHARG
Chromium	Sample Measurement	*	*	*	*	*	*	*		
	Permit Requirement	*	*	*	*	0.2	0.2	MG/L	*	2/YEAR
Zinc	Sample Measurement	*	*	*	*	*	*	*		
	Permit Requirement	*	*	*	*	1.0	1.0	MG/L	*	2/YEAR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Joseph W. Venzoni
 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: Donald Salera
 For JWV
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 724 682-5113
 AREA CODE NUMBER

DATE
 02 06 26
 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 CT-1 CLAMICIDE APPLICATIONS WERE DONE IN MAY 2002, NO DISCHARGE OF CT-1 OCCURRED.

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

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

(2-16)			(17-19)				
PA0025615			001 (CONT)				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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)	
		(3 Card Only) (46-53)	AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45)	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	*	*		<0.01	<0.01	<0.01		*	2/31	GRAB	
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	2/MONTH	GRAB	
Iron	Sample Measurement	*	*		*	3.7	4.3		*	2/31	GRAB	
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	2/MONTH	GRAB	
Aluminum	Sample Measurement	*	*		3.5	5.1	6.7		*	2/31	GRAB	
	Permit Requirement	*	*	*	MONITOR AND REPORT			MG/L	*	2/MONTH	GRAB	
pH	Sample Measurement	*	*		8.11	*	8.30		*	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. Venzou
 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 Donald J. Valera
 For Jimmy
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 724 682-5113
 AREA CODE NUMBER

DATE
 02 06 26
 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 REQUIRED DURING WET LAY-UP. PLANT WAS NOT IN WET LAY-UP IN MAY 2002.

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			102			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

FROM

TO

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	UNITS				
Flow	Sample Measurement	20.001	20.001			*	*	*			2/31	Est
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	*	*	2/MONTH	ESTIMATE
Suspended Solids	Sample Measurement	*	*			*	12.4	14.3		0	2/31	GRAB
	Permit Requirement	*	*	*	*	*	30	100	MG/L	*	2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*			*	25.0	25.0		0	2/31	GRAB
	Permit Requirement	*	*	*	*	*	15	20	MG/L	*	2/MONTH	GRAB
pH	Sample Measurement	*	*			7.38	*	7.59		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. Venizel 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 06 26 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

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	05	01		02	05	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	UNITS				
Flow	Sample Measurement	0.006	0.046			*	*	*			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	*	*	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>JOSEPH W. VERNON</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)	<u>Donald Salera</u> FOR J.W.V.	TELEPHONE <u>724 682-5113</u>	DATE <u>02</u> / <u>06</u> / <u>26</u> 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.



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

June 26, 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 103

Dear Sir or Madam:

During the month of May 2002, Outfall 103 (Clarifier Settling Basin) exceeded the monthly minimum pH effluent limit of 6.0. The pH was determined to be 5.79 S.U. on May 12, 2002.

The clarifier settling basin receives reverse osmosis reject water from our raw water treatment vendor. The reject water is normally maintained between pH 6.0 to 6.2 to ensure scaling of the reverse osmosis membrane is minimized. On the day of the event, the pH of the reject water was measured at 5.0 S.U. Because of the low pH of the reject water, the clarifier settling basin pH exceeded minimum pH effluent limitations.

The water treatment vendor was immediately notified and reject water discharge to the clarifier settling basin was terminated. The clarifier settling basin was resampled on May 13, 2002 and the pH was within permit effluent limits.

Beaver Valley Power Station now monitors the reject water from the water treatment vendor on a daily basis. If reject water falls below pH of 6.0, the discharge is terminated.

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
Central File

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	103
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
YEAR MO DAY	YEAR MO DAY
02 05 01	02 05 31
(20-21) (22-23) (24-25)	(26-27) (28-29) (30-31)

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

FROM

TO

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	0.025	0.061		*	*	*		3/31	MEAS
	Permit Requirement	MONITOR AND REPORT						*	2/MONTH	ESTIMATE
Suspended Solid	Sample Measurement	*	*		*	18.1	19.7		2/31	24 HR COMP
	Permit Requirement	*	*	*	*	30	100	MG/L	2/MONTH	24 HOUR COMPOSITE
pH	Sample Measurement	*	*		5.79	*	6.89		1*	3/31
	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. Norton
 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 Donald Salera
 For JWV
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 724 682-5113
 AREA CODE NUMBER

DATE
 02 06 26
 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.

* SEE ATTACHED LETTER FOR EXPLANATION OF EXCURSION

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	05	01		02	05	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

FROM

TO

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			
Flow	Sample Measurement	0.0014	*	MGD	*	*	*	0	1/1	MEAS
	Permit Requirement	0.023	*		*	*	*	*	*	1/WEEK
CBOD-5 Day	Sample Measurement	*	*	*	*	2.6	3.2	0	2/31	8 HR comp
	Permit Requirement	*	*		*	*	25	50	*	2/MONTH
Suspended Solids	Sample Measurement	*	*	*	*	11.9	16.5	0	2/31	8 HR comp
	Permit Requirement	*	*		*	*	30	60	*	2/MONTH
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.52	0.55	0	2/31	GRAB
	Permit Requirement	*	*		*	*	1.4	INST MAX 3.3	*	2/MONTH
Fecal Coliform May 1 to Sep 30 Oct 1 to Apr 30	Sample Measurement	*	*	*	*	0.0	0.0	0	2/31	GRAB
	Permit Requirement	*	*		*	*	200 2000	1000 *	*	2/MONTH
pH	Sample Measurement	*	*	*	*	7.87	7.89	0	2/31	GRAB
	Permit Requirement	*	*		*	*	6.0	9.0	*	2/MONTH
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Joseph W. Venezia</i> <i>Chemistry Manager</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>Donald J. Salera</i> For JWR	TELEPHONE	DATE	
			AREA CODE NUMBER <i>24 682-5113</i>	YEAR <i>02</i>	MO <i>06</i>

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			303			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

FROM

TO

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	0.019	0.056		*	*	*			1/7	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	14.2	25.6		0	1/7	GRAB
	Permit Requirement	*	*	*	*	30	100	MG/L	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	15.0	5.0		0	1/7	GRAB
	Permit Requirement	*	*	*	*	15	20	MG/L	*	1/WEEK	GRAB
pH	Sample Measurement	*	*		7.12	*	7.43		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. Venezia
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)

Donald Salera
FOR JTW
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
74 682-5113
 AREA CODE NUMBER

DATE
02 06 26
 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	05	01		02	05	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			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	30	100	MG/L	*	1/WEEK
Oil and Grease	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	15	20	MG/L	*	1/WEEK
Hydrazine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	NOT DETECTABLE USING ASTM D-1385			MG/L	*	1/WEEK
Ammonia	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	1/WEEK
Total Residual Chlorine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	0.5	INSTANT MAX 1.25	MG/L	*	1/WEEK
Clamrol (CT-1)	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	NOT DETECTABLE			MG/L	*	WHEN DISCHARGE
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. VENZON CHEMISTRY MANAGER TYPE OR PRINT					724 692-5113			02 06 26 YEAR MO DAY		
					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					
					Donald J. Valera FOR JWR					

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

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	05	01		02	05	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			
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. Newson 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 Donald J. Salera 2002 JULY	TELEPHONE	DATE		
			724 682-5113	02	06	26
		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.

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			003				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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				UNITS
Flow	Sample Measurement	0.045	0.122		*	*	*		2/31	EST	
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*		2/MONTH	ESTIMATE
Iron	Sample Measurement	*	*		*	0.79	1.0		2/31	GRAB	
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Aluminum	Sample Measurement	*	*		*	1.2	2.0		2/31	GRAB	
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Phenols	Sample Measurement	*	*		*	40.01	40.01		2/31	GRAB	
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Nitrate-Nitrite	Sample Measurement	*	*		*	12.5	13.0		2/31	GRAB	
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
Phosphorus	Sample Measurement	*	*		*	0.85	1.0		2/31	GRAB	
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH	GRAB
	Sample Measurement	*	*		*	*	*		*	*	
	Permit Requirement	*	*	*	*	*	*		*	*	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)			TELEPHONE			DATE				
Joseph W. Venzon Chemistry Manager TYPE OR PRINT				Donald J. Salera for JWB			724 682-5113		02	06	26
				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.

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			004				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	2.8	7.7	MGD	*	*	*		1/31*	MEAS
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	MEASURED
Free Available Chlorine	Sample Measurement	*	*	*	*	0.0	0.0	0	1/31*	GRAB
	Permit Requirement	*	*		*	*	AVG CONC 0.2	MAX CONC 0.5	*	1/WEEK
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.04	0.04	0	1/31*	GRAB
	Permit Requirement	*	*		*	*	0.5	1.25	*	1/WEEK
Iron	Sample Measurement	*	*	*	*	0.89	*		1/31*	GRAB
	Permit Requirement	*	*		*	*	MONITOR AND REPORT		*	2/MONTH
Aluminum	Sample Measurement	*	*	*	*	0.55	0.55		2/31*	GRAB
	Permit Requirement	*	*		*	*	MONITOR AND REPORT		*	2/MONTH
Phenols	Sample Measurement	*	*	*	*	LO.01	LO.01		1/31*	GRAB
	Permit Requirement	*	*		*	*	MONITOR AND REPORT		*	2/MONTH
Chromium	Sample Measurement	*	*	*	*					
	Permit Requirement	*	*		*	*	0.2	0.2	mg/l	2/YEAR
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. VENGZOU Chemical Manager TYPE OR PRINT						724 682-5113		02	06	26
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE NUMBER		YEAR	MO	DAY
	Donald J. Salera FOR JUV									

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 1 WEEK IN MAY 2002.

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			004 (CONT)				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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) (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	UNITS				
Zinc	Sample Measurement	*	*			*				*	2/YEAR	GRAB
	Permit Requirement	*	*	*		*	1.0	1.0	MG/L	*		
pH	Sample Measurement	*	*			7.98	*	7.98		0	1/31*	GRAB
	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. Ventzen 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)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Donald J. Salera FOR JWV	TELEPHONE	DATE	
			AREA CODE NUMBER 214 682-5113	YEAR 02	MO 06

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 1 WEEK IN MAY 2002.

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			008 (CONT)				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY 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			
Phenols	Sample Measurement	*	*	*	*	20.01	20.01		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH
Zinc	Sample Measurement	*	*	*	*	0.17	0.20		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	*	2/MONTH
Color	Sample Measurement	*	*	*	*	53	91		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		UNITS	*	2/MONTH
pH	Sample Measurement	*	*	*	7.52	*	7.52		2/31	GRAB
	Permit Requirement	*	*	*	6.0	*	9.0	S.U.	*	2/MONTH
	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 includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

Donald J. Talera
 FOR STAFF
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 74 682-513
 AREA CODE NUMBER

DATE
 02 06 26
 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			006				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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			
Flow	Sample Measurement				*	*	*			
	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 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. VENZA Chemistry Manager TYPE OR PRINT	<i>Joseph VENZA</i> FOR JWM	724 682-5113 AREA CODE NUMBER	02 06 26 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			007				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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			
Flow	Sample Measurement				*	*	*			
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	*	1/WEEK
Free Available Chlorine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	0.2 AVG CONC	0.5 MAX CONC	MG/L	*	1/WEEK
Total Residual Chlorine	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	0.5	1.25	MG/L	*	1/WEEK
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	*	*	*	*	*	*	*	*	*

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. Venzen Chemistry Manager TYPE OR PRINT	Donald J. Stalero FOR JAV	724 682-5113	02 06 26 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.

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			008			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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	40.001	40.001	MGD	*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	*	*	13.4	14.7	0	2/31	GRAB
	Permit Requirement	*	*		*	30	100	MG/L	*	2/MONTH
Oil and Grease	Sample Measurement	*	*	*	*	9.0	12.0	0	2/31	GRAB
	Permit Requirement	*	*		*	15	20	MG/L	*	2/MONTH
Ammonia	Sample Measurement	*	*	*	*	40.1	40.1		2/31	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT		MG/L	*	2/MONTH
Iron, tot	Sample Measurement	*	*	*	*	1.2	1.3		2/31	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT		MG/L	*	2/MONTH
Aluminum	Sample Measurement	*	*	*	*	0.22	0.22		2/31	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT		MG/L	*	2/MONTH
Manganese	Sample Measurement	*	*	*	*	0.95	1.0		2/31	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT		MG/L	*	2/MONTH
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. Vercan CHEMISTRY MANAGER TYPE OR PRINT					724 682-5113			02	06	26
	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.

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	110
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY	YEAR MO DAY
02 05 01	02 05 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			
Flow	Sample Measurement				*	*	*			
	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 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 <i>Joseph W. Venzon</i>	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 06 26 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			010			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FROM

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 (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	MEASURED
Free Available Chlorine	Sample Measurement	*	*		*	0.0	0.0	0	1/7	GRAB
	Permit Requirement	*	*	*	*	AVG CONC 0.2	MAX CONC 0.5	MG/L	1/WEEK	GRABWHILE CHLORO
Total Residual Chlorine	Sample Measurement	*	*		*	0.0	0.0	0	1/7	GRAB
	Permit Requirement	*	*	*	*	0.5	1.25	MG/L	1/WEEK	GRABWHILE CHLORO
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
pH	Sample Measurement	*	*		7.50	*	7.87	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)

Donald J. Salera
 For JWV
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 724 682-5113
 AREA CODE NUMBER

DATE
 02 06 26
 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 CT-1 WAS APPLIED FOR ASIATIC CLAM CONTROL DURING THE MONTH OF MAY 2002.
 NO DISCHARGE OF CT-1 OCCURRED

PERMITTEE NAME ADDRESS (Include Facility Name / Location)

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

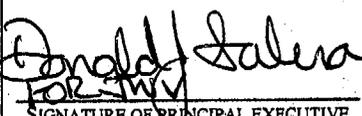
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

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	05	01		02	05	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	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM				UNITS
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	*	*		6.61	*	7.25		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)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			724 682-5113 AREA CODE NUMBER	02 06 26 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)

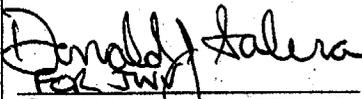
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16)			(17-19)			
PA0025615			211			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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	0.002	0.002		*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			MGD	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*		*	7.2	13.4	0	1/7	GRAB
	Permit Requirement	*	*	*	*	30	100	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*		*	15.0	15.0	0	1/7	GRAB
	Permit Requirement	*	*	*	*	15	20	*	1/WEEK	GRAB
pH	Sample Measurement	*	*		6.94	*	7.30	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. DENZON 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)	 DONALD J. SALERA FOR JWD SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE
			724 682-5113	02 06 26 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			011				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	0.004	0.004		*	*	*		1/9	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	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. DENZON 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 Donald J. Galera FOR JWR	TELEPHONE	DATE
			724 682-5113 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.

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	012
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
FROM YEAR MO DAY	TO YEAR MO DAY
02 05 01	02 05 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	MGD	*	*	*		1/31	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/MONTH	ESTIMATE
Total Dissolved Solids	Sample Measurement	*	*	MG/L	*	612	720		1/7	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT			*	1/WEEK
Chromium	Sample Measurement	*	*	MG/L	*	20.0024	0.003	0	1/7	GRAB
	Permit Requirement	*	*		*	0.2	0.2	*	1/WEEK	GRAB
Zinc	Sample Measurement	*	*	MG/L	*	7.34	8.28	5*	1/7	GRAB
	Permit Requirement	*	*		*	1.0	1.0	*	1/WEEK	GRAB
Copper	Sample Measurement	*	*	MG/L	*	0.11	0.12		1/7	GRAB
	Permit Requirement	*	*		*	MONITOR AND REPORT			*	1/WEEK
pH	Sample Measurement	*	*	S.U.	8.58	*	8.58	0	1/31	GRAB
	Permit Requirement	*	*		*	6.0	*	9.0	*	1/MONTH
	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 724 682-5113	DATE	
			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Dorinda Salera for JWV	AREA CODE NUMBER 02 06 26 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.

* SEE ATTACHED LETTER FOR EXPLANATION OF EXCURSIONS.



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

June 26, 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

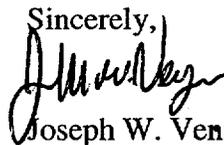
Dear Sir or Madam:

During the month of May 2002, 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 8.28 mg/L on May 8, 2002; 7.89 mg/L on May 12, 2002; 4.72 mg/L on May 23, 2002; and 7.8 mg/L on May 28, 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
Central File

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

(2-16)			(17-19)				
PA0025615			113				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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	0.006	*	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
	Permit Requirement	*	*		*	25	50	*	*	2/MONTH
Suspended Solids	Sample Measurement	*	*	MG/L	*	18.7	25.8	0	2/31	8 HR COMP
	Permit Requirement	*	*		*	30	60	*	*	2/MONTH
Total Residual Chlorine	Sample Measurement	*	*	MG/L	*	0.20	0.24	0	4/31	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	*	*	#/100ML	*	11.1	14.0	0	2/31	GRAB
	Permit Requirement	*	*		*	200	1000	*	*	2/MONTH
pH	Sample Measurement	*	*	S.U.	7.52	*	7.66	0	2/31	GRAB
	Permit Requirement	*	*		*	6.0	*	9.0	*	2/MONTH
	Sample Measurement	*	*	*	*	*	*	*	*	*
	Permit Requirement	*	*	*	*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Joseph W. Venezia
 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 Donald J. Salera
 FOR JWR
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 724 682-5113
 AREA CODE NUMBER

DATE
 02 06 26
 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			213			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	05	01		02	05	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) 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
Suspended Solids	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	30	100	MG/L	2/MONTH	GRAB
Oil and Grease	Sample Measurement	*	*		*					
	Permit Requirement	*	*	*	*	15	20	MG/L	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	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. Ventron CHEMISTRY MANAGER TYPE OR PRINT	Donald J. Salera FOR JWR SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	724 682-5113 AREA CODE NUMBER	02 06 26 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			313				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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 (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
Flow	Sample Measurement	0.002	0.002	MGD	*	*	*	*	1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	MG/L	*	4.3	5.3	0	1/7	GRAB
	Permit Requirement	*	*		*	30	100	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*	MG/L	*	LS.0	LS.0	0	1/7	GRAB
	Permit Requirement	*	*		*	15	20	*	1/WEEK	GRAB
pH	Sample Measurement	*	*	S.U.	6.88	*	7.37	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. Harizan</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 includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	<i>Donald Salera</i> FOR STATE SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
			724 6825113 AREA CODE NUMBER	02 YEAR	06 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.

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			413				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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)		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	20.001	20.001	MGD	*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Suspended Solids	Sample Measurement	*	*	MG/L	*	9.2	22.4	0	1/7	GRAB
	Permit Requirement	*	*		*	30	100	*	1/WEEK	GRAB
Oil and Grease	Sample Measurement	*	*	MG/L	*	15.0	25.0	0	1/7	GRAB
	Permit Requirement	*	*		*	15	20	*	1/WEEK	GRAB
pH	Sample Measurement	*	*	S.U.	7.30	*	7.83	0	1/7	GRAB
	Permit Requirement	*	*		*	6.0	*	9.0	*	1/WEEK
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*
	Sample Measurement	*	*		*	*	*	*	*	*
	Permit Requirement	*	*		*	*	*	*	*	*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Joseph W. Venezia 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)	TELEPHONE 224 682-5113	DATE 02 06 26 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

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

(2-16)			(17-19)				
PA0025615			013				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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) (64-68)	SAMPLE TYPE (69-70) (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	Sample Measurement	0.009	0.014	MGD	*	*	*		1/7	EST
	Permit Requirement	MONITOR AND REPORT			*	*	*	*	1/WEEK	ESTIMATE
Total Residual Chlorine	Sample Measurement	*	*	*	*	0.10	0.19	0	2/31	CALC
	Permit Requirement	*	*		*	0.5	1.25	MG/L	*	2/MONTH
Copper	Sample Measurement	*	*	*	*	0.038	0.054		1/7	CALC
	Permit Requirement	*	*		*	MONITOR AND REPORT		MG/L	*	1/WEEK
Chlorobenzene	Sample Measurement	*	*	*	*					
	Permit Requirement	*	*		*	MONITOR AND REPORT		MG/L	*	2/QUARTER
Temperature	Sample Measurement	*	68	°F	*	*	*		1/7	GRAB
	Permit Requirement	*	110		*	*	*	*	*	1/WEEK
Cyanide, tot	Sample Measurement	*	*	*	*	20.02	40.02		2/31	CALC
	Permit Requirement	*	*		*	MONITOR AND REPORT		S.U.		2/MONTH
pH	Sample Measurement	*	*	*	6.85	*	7.22	0	1/7	CALC
	Permit Requirement	*	*		*	6.0	*	9.0	S.U.	1/WEEK

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH W. VETZON 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 724 682-5113	DATE		
			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.

PERMITTEE NAME ADDRESS (Include Facility Name / Location)

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

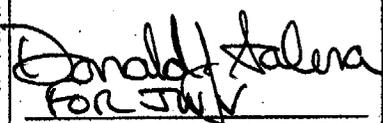
NAME: First Energy Nuclear Operating Company
 ADDRESS: 76 South Main Street
 Akron, OH 44308

(2-16)			(17-19)				
PA0025615			004 (CONT)				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	02	05	01		02	05	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				UNITS
Zinc	Sample Measurement	*	*		*						
	Permit Requirement	*	*	*	*	1.0	1.0	MGL	*	2/YEAR	GRAB
pH	Sample Measurement	*	*		7.98	*	7.98		0	1/31*	GRAB
	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. Venzou 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	DATE
			AREA CODE: 214 682-5113 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.

* DISCHARGE OCCURRED IN 1 WEEK IN MAY 2002.

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) PA0025615 PERMIT NUMBER	(17-19) 008 (CONT) DISCHARGE NUMBER
MONITORING PERIOD	
FROM YEAR MO DAY 02 05 01 (20-21) (22-23) (24-25)	TO YEAR MO DAY 02 05 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			
Phenols	Sample Measurement	*	*	*	*	20.01	20.01		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Zinc	Sample Measurement	*	*	*	*	0.17	0.20		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		MG/L	2/MONTH	GRAB
Color	Sample Measurement	*	*	*	*	53	91		2/31	GRAB
	Permit Requirement	*	*	*	*	MONITOR AND REPORT		UNITS	2/MONTH	GRAB
pH	Sample Measurement	*	*	*	7.52	*	7.52		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 includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

Donald J. Talera
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 724 682-5113
 AREA CODE NUMBER

DATE
 02 06 26
 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.