



Nuclear Fuel Services, Inc.

1205 Banner Hill Road
Erwin, TN 37650

(423) 743-9141

www.nuclearfuelservices.com

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

21G-08-0146
GOV-05-01-01
ACF-08-0266

September 11, 2008

Mr. Christopher S. Moran
Enforcement and Compliance Section
Tennessee Department of Environment and Conservation
Division of Water Pollution Control
6th Floor, L&C Annex, 401 Church Street
Nashville, TN 37243-1534

References: 1) Nuclear Fuel Services, Inc. (NFS) NPDES Permit No. TN0002038
 2) e-mail from Mr. Brent Lecher, dated 1/31/06 to Joyce Griffith
 3) DEEMERs User's Guide, dated 1/06, Section 8.g.i
 4) Electronic Reporting System for Submittal of DMRs – "DEEMERs" (letter from C.S. Moran
 and K. Fowlkes, TDEC to B.M. Moore, NFS), dated June 24, 2002
 5) DEEMERs Electronic Application Package (letter from K. Fowlkes and C.S. Moran, TDEC
 to B.M. Moore, NFS), dated October 25, 2002

Dear Mr. Moran:

As required by Part I, D.1 of NPDES Permit #TN0002038, we hereby submit the Monthly Discharge Monitoring Report (DMR), EPA Form 3320-1, for August 2008 as Attachment 1. As requested in Reference 2 above, NFS is also electronically submitting the August DMR via the DEEMERs system.

Laboratory analyses for required permit parameters were performed on ten (10) Waste Water Treatment Facility (WWTF) batches discharged during this reporting period. All values were indicated by these analyses to be within their respective permit conditions.

If you or your staff have any questions, require additional information, or wish to discuss this, please contact me or Ms. Joyce Griffith, Environmental Scientist, at (423) 743-9141. Please reference our unique document identification number (21G-08-0146) in any correspondence concerning this letter.

Sincerely,

NUCLEAR FUEL SERVICES, INC.

B. Marie Moore
Vice President, Safety & Regulatory

CAH/lsm
Attachment (1)

B. Marie Moore to Mr. Christopher S. Moran
September 11, 2008

21G-08-0146
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cc: U.S. Nuclear Regulatory Commission
Region II, Atlanta Federal Center
61 Forsyth Street, S. W., Suite 23T85
Atlanta, GA 30303

Mr. Jeff Horton, Manager
Johnson City Basin
TN Division of Water Pollution Control
2305 Silverdale Road
Johnson City, TN 37601-2162

B. Marie Moore to Mr. Christopher S. Moran
September 11, 2008

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Attachment I

August 2008 DMR

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

NAME Nuclear Fuel Services

ADDRESS P.O. Box 337

MS 123

Erwin TN 37650

FACILITY Nuclear Fuel Services

LOCATION Erwin TN 37650

Attn: Ms. B. Marie Moore

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	TN0002038
DISCHARGE NUMBER	001 G

MAJOR

(SUBR 06)

F - FINAL

TREATED PROCESS WASTEWATER
EFFLUENT

EMH

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
08	08	01	08	08	31

*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			Quality or Concentration			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	***	***	***	***	***	***	(19)	0	10 / 10	GRAB
00340 1 0 0 EFFLUENT GROSS VALUE	***	***	***	***	***	***	MG/L		ONCE / MONTH	GRAB
PH	***	***	***	6.40	***	***	(12)	0	10 / 10	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	***	***	***	6	***	***	SU		ONCE / BATCH	GRAB
SOLIDS, TOTAL SUSPENDED	***	***	***	***	***	***	11	0	10 / 10	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	***	***	***	30	MO AVG	4.80	MG/L		ONCE / BATCH	GRAB
SOLIDS, SETTLEABLE	***	***	***	***	***	***	(25)	0	10 / 10	GRAB
00545 1 0 0 EFFLUENT GROSS VALUE	***	***	***	***	***	***	ML/L		ONCE / BATCH	GRAB
NITROGEN, AMMONIA TOTAL (AS N)	***	***	***	***	***	***	(19)	0	10 / 10	GRAB
00610 1 0 0 EFFLUENT GROSS VALUE	***	***	***	20	MO AVG	17.00	MG/L		ONCE / BATCH	GRAB
NITRITE PLUS NITRATE TOTAL 1 DET. (AS N)	***	***	***	***	***	***	MG/L		ONCE / BATCH	GRAB
00630 1 0 0 EFFLUENT GROSS VALUE	***	***	***	***	***	***	MG/L		ONCE / BATCH	GRAB
FLUORIDE, TOTAL (AS F)	***	***	***	***	***	***	(19)	0	10 / 10	GRAB
00951 1 0 0 EFFLUENT GROSS VALUE	***	***	***	15	MO AVG	20	MG/L		ONCE / BATCH	GRAB

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

B. Marie Moore
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

423 | 743-9141
AREA CODE NUMBER

DATE
YEAR MO DAY
08 09 11

TYPED OR PRINTED

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
B. Marie Moore, Vice President
Safety & Regulatory

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

MON AVG ONLY APPLIES IF MERCURY IS OCCURS FOUR OR MORE DAYS A WEEK. IF ANY INDIVIDUAL ANALYTICAL TEST RESULT FOR MERCURY IS LESS THAN THE MIN (0.0002 MG/L) A VALUE OF ZERO MAY BE USED. THE TRC LIMIT IS ONLY APPLICABLE WHEN CHLORINE IS USED IN THE TREATMENT PROCESS.

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

NAME Nuclear Fuel Services
ADDRESS P.O. Box 337
MS 123
Erwin

TN 37650

FACILITY Nuclear Fuel Services
LOCATION Erwin
Attn: Ms. B. Marie Moore

TN 37650

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

TN0002038	001 G
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR
(SUBR 06)
F - FINAL
TREATED PROCESS WASTEWATER
EFFLUENT

EMH

MONITORING PERIOD					
AVERAGE		MINIMUM		MAXIMUM	
YEAR	MO	DAY	YEAR	MO	DAY
08	08	01	08	08	31

*** NO DISCHARGE ***
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PARAMETER	QUANTITY OR LOADING			Quality or Concentration			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
CADMIUM, TOTAL (AS CD)	01027	1	0	0	PERMIT REQUIREMENT	0.0100	(19)	0	01 / 30	GRAB
COPPER, TOTAL (AS CU)	01042	1	0	0	PERMIT REQUIREMENT	0.0300	(19)	0	ONCE / MONTH	GRAB
LEAD, TOTAL (AS PB)	01051	1	0	0	PERMIT REQUIREMENT	0.0250	(19)	0	ONCE / MONTH	GRAB
SILVER, TOTAL (AS AG)	01077	1	0	0	PERMIT REQUIREMENT	0.0100	(19)	0	ONCE / MONTH	GRAB
URANIUM, NATURAL, TOTAL	22708	1	0	0	PERMIT REQUIREMENT	0.05	(19)	0	ONCE / MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	50050	1	0	0	PERMIT REQUIREMENT	0.09	(19)	0	ONCE / MONTH	GRAB
CHLORINE, RESIDUAL	50060	1	0	0	PERMIT REQUIREMENT	N/A	(19)	0	ONCE / MONTH	GRAB
I certify, under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			SIGNATURE OF PRINCIPAL EXECUTIVE			TELEPHONE		DATE		
B. Marie Moore, Vice President Safety & Regulatory						423 743-9141		08 09 11		
TYPED OR PRINTED			OFFICER OR AUTHORIZED AGENT			AREA CODE NUMBER		YEAR MO DAY		

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