

May 28, 1997



Consolidated Edison Company of New York, Inc.
Indian Point Station
Broadway & Bleakley Avenue
Buchanan, New York 10511-1099

NYSDEC - Division of Water
SPDES Compliance Information Section
Bureau of Water Compliance Programs
50 Wolf Road - Room 320
Albany, New York 12233-3506

Re: Monthly Discharge Monitoring Report
Permit #NY0004472
New York Power Authority Indian Point Unit 3

Gentlemen:

Enclosed are the Discharge Monitoring Reports (DMR) for the month of April 1997. A Report of Noncompliance Event is attached for a noncompliance which occurred at New York Power Authority Unit 3 Facility.

Explanation for deviations from the permitted circulator flows are forwarded to the Department of Environmental Conservation as they occur and, therefore, are not enclosed.

If you have any questions regarding this submission, please contact Mr. Reynolds J. Burns of Con Edison (914)734-5605 or Mr. Matthew Kerns of New York Power Authority at (914)736-8452.

Very truly yours,

Chris English
Env. Manager
Indian Point Station
Con Edison Units 1 & 2

Attachment

/kj

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PDR ADOCK 05000286
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Report of Noncompliance Event

To: DEC Water Contact CESARE MANFREDI RWE DEC Region: 3

Report Type: 5 Day Permit Violation Order Violation Anticipated Noncompliance Bypass/Overflow

SECTION 2

SPDES #: NY- 0004472 Facility: NEW YORK POWER AUTHORITY, INDIAN POINT #3

Date of noncompliance: 4 / 8 / 97 Location (Outfall, Treatment Unit, or Pump Station): OUTFALL 001*

Description of noncompliance(s) and cause(s): While excavating to make repairs to service water lines a 4" sewage line was unearthed and found to be leaking. During this time the water collecting at the bottom of the excavated pit was being pumped to (2) two berms and then drained to a storm drain, and subsequently to the site discharge canal. Two samples confirmed the presence of fecal coliform in the water remaining in the two berms.

Has event ceased? (Yes) (No) If so, when? 4/8/97 12:00 Was event due to plant upset? (Yes) (No) SPDES limits violated? (Yes) (No)

Start date, (time of event): 4 / 8 / 97, 0800 (AM) (PM) End date, (time of event): 4 / 8 / 97, 12:00 (AM) (PM)

Date, time oral notification made to DEC? 4 / 11 / 97, 11 :45 (AM) (PM) DEC Official contacted: Leonard Meyerson

Immediate corrective actions: The lavatory to which this 4" sewage line provides service was secured. A Sodium hypochlorite solution was added to the berms as a precaution. NYSDEC was contacted. A cover page describing this event is required in lieu of a 5 day report. The Board of Health was contacted in regards to this event. As per telecom with Vincent McCabe this report is being submitted in lieu of the 5 day follow-up report.

Preventive (long term) corrective actions: The 4" sewage line will remain isolated until repair/replacement can be completed.

SECTION 3

Complete this section if event was a bypass:

Bypass amount: _____ Was prior DEC authorization received for this event? (Yes) (No)

DEC Official contacted: _____ Date of DEC approval: _____ / _____ / _____

Describe event in "Description of noncompliance and cause" area in Section 2. Detail the start and end dates and times in Section 2 also.

SECTION 4

Facility Representative: Ken Peters Title: Licensing Manager Date: 4 / 21 / 97

Phone #: (914) 736 . 8029 Fax #: (914) 736 . 8769