NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) Form Approved. PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) SUM OF 001B, C, D, EOMB No. 2040-0004 (SUBR 03) NAME CONSOLIDATED EDISON OF NY (2-16) (SUBR 03) CHIM 7 NYOOO4472 ADDRESS INDIAN POINT STATION #1.2 & 3 PERMIT NUMBER DISCHARGE NUMBER F - FTNAI BROADWAY & BLEAKLEY AVE MA.IOR NY 10511 **BUCHANAN** MONITORING PERIOD FACILITY INDIAN POINT STATION #1,2 & 3 YEAR MO DAY YEAR MO DAY LOCATION BUCHANAN *** NO DISCHARGE NY 10511 FROM 98 03 01 TO 98 03 31 NOTE: Read instructions before completing this form. (26-27) (28-29) (30-31) (20-21) (22-23) (24-25) ATTN: RAYMOND BURNS QUANTITY OR CONCENTRATION QUANTITY OR LOADING 3 Card Only) 14 Card Only) NO. FREQUENCY SAMPLE **PARAMETER** (46-53) (54-61) 138-451 (46-53) (54-61) FX TYPE (32-37) ANALYSIS **AVERAGE** MAXIMUM UNITS UNITS MINIMUM **AVERAGE** MAXIMUM (62-63) (64-68) (69-70) SAMPLE (19)SOLIDS, TOTAL *** **** **** 0 5.0 16 GLAB MEASUREMENT SUSPENDED PERMIT 30 50 WEEKLYGRAB ***** 00530 1 0 0 **** REQUIREMENT DAILY MX MG/L DATLY AV EFFLUENT GROSS VALU SAMPLE **** **** (03)FLOW. IN CONDUIT OR D.248 31 INSTAN 0.127 MEASUREMENT THRU TREATMENT PLANT PERMIT WEEKLYINSTAI REPORT **** ***** *** 50050 1 0 0 REPORT REQUIREMENT *** DAILY MX MGD EFFLUENT GROSS VALUE DATLY AV SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND **TELEPHONE** DATE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR ENY, MANAGER OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS 98 TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING CHRIS, ENGLISH 734-5208 THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. \$ 1001 AND 33 SIGNATURE OF PRINCIPAL EXECUTIVE U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 NUMBER YEAR MO DAY OFFICER OR AUTHORIZED AGENT TYPED OR PRINTED and or maximum imprisonment of between 6 months and 5 years.) COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) 9805080055 980424 PDR ADUCK 05000286 PDR V

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(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

DISCHARGE MONITORING REPORT (DMR) SUM OF 001C.001D.00110 60400904 CONSOLIDATED EDISON OF NY (2-16)(SUBR 03) NY0004472 SUM 4 ADDRESS INDIAN POINT STATION #1,2 & 3 **PERMIT NUMBER** DISCHARGE NUMBER F - FINAL BROADWAY & BLEAKLEY AVE MAJOR BUCHANAN NY 10511 **MONITORING PERIOD** FACILITY INDIAN POINT STATION #1,2 & 3 YEAR MO DAY YEAR MO DAY **LOCATION BUCHANAN** *** NO DISCHARGE NY 10511 FROM 98 03 01 .TO 98 03 31 NOTE: Read instructions before completing this form. (26-27) (28-29) (30-31) (20-21) (22-23) (24-25) ATTN: RAYMOND BURNS QUANTITY OR CONCENTRATION QUANTITY OR LOADING (4 Card Only) FREQUENCY (3 Card Only) NO. SAMPLE **PARAMETER** (46-53)(54-61) (38-45) (46-53)(54-61) EX TYPE (32-37)ANALYSIS UNITS MINIMUM **AVERAGE MAXIMUM** UNITS **AVERAGE** MAXIMUM (62-63) (64-68)(69-70) SAMPLE ***** 女女女女女女 (19)0 /31 GRAB **** DIL AND GREASE **** a . a MEASUREMENT FREON EXTR-GRAV METH ONCE/ GRAB PERMIT 15 ***** **** ***** ***** *** 00556 1 0 0 REQUIREMENT MG/L MONTH MUMIXAM EFFLUENT GROSS VALUE **** SAMPLE MEASUREMENT PERMIT REQUIREMENT I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND TELEPHONE. DATE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR ENY, MANAGER 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. 3 1001 AND 33 HRIS, ENGLISH SIGNATURE OF PRINCIPAL EXECUTIVE U.S.C. § 1319. (Penelties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.) NUMBER YEAR MO TYPED OR PRINTED OFFICER OR AUTHORIZED AGENT DAY COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Form Approved.

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19) Form Approved. PERMITTEE NAME/ADDRESS (Include Facility Name/Location (f Different) TOTAL FACILITY DISCHASE 48 AND CONSOLIDATED EDISON OF NY (SUBR 03) ADDRESS INDIAN POINT STATION #1,2 & 3 NY0004472 001 K PERMIT NUMBER DISCHARGE NUMBER F - FINAL BROADWAY & BLEAKLEY AVE NY 10511 MAJOR BUCHANAN MONITORING PERIOD FACILITY INDIAN POINT STATION #1,2 & 3 YEAR MO DAY YEAR MO DAY **LOCATION BUCHANAN** *** NO DISCHARGE NY 10511 FROM 98 TO 98 03 31 03 01 NOTE: Read instructions before completing this form. (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) ATTN: RAYMOND BURNS QUANTITY OR CONCENTRATION 3 Card Only) QUANTITY OR LOADING (4 Card Only) FREQUENCY NO. SAMPLE **PARAMETER** (46-53) (54-61) (38-45)(46-53)(54-61) EX TYPE. (32-37) ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM **AVERAGE MAXIMUM** UNITS (62-63)(64-68) (69-70) SAMPLE TEMPERATURE. WATER **** **** **** (15)***** GRAB 64-4 MEASUREMENT DEG. FAHRENHEIT PERMIT DAILY ***** 110 GRAB 100011 W 0 0 ***** **** **** REQUIREMENT DAILY MX DEG.F *** SEE COMMENTS BELOW SAMPLE (12)**业业业业业** PH **** **** 7.7 7.9 GRAB MEASUREMENT PERMIT WEEKLYGRAB ***** **** **** 6.0 ***** 9.0 00400 1 o REQUIREMENT **MAXIMUM** SU *** MINIMUM EFFLUENT GROSS VALUE SAMPLE (19)**** l(26) **** BORON. TOTAL 54.a < 1.0 O CALCID MEASUREMENT (AS B) WEEKLYCALCTO PERMIT 1.0 525 **** ***** 01022 1 0 0 ***** REQUIREMENT DAILY MX MG/L EFFLUENT GROSS VALUE DAILY MX LBS/DY SAMPLE **** **** (19)**** LITHIUM, TOTAL 4 D.OI 0 31 **ICALCTI** MEASUREMENT (AS LI) PERMIT 0.01 DNCE/ CALCTO **** 01132 1 0 0 ***** **** *** ***** REQUIREMENT DATLY HX MG/L MONTH <u>EFFLUENT GROSS VALUE</u> **** SAMPLE **** (19) ***** **** **** CHLORINE, TOTAL 0-1 GRAB MEASUREMENT RESTOUAL PERMIT 0.2 CONTINCONTIN ***** ***** ***** *** 50060 1 0 0 ***** REQUIREMENT DAILY MX MG/L UOUS *** EFFLUENT GROSS VALUE SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND **TELEPHONE** NAME/TITLE PRINCIPAL EXECUTIVE OFFICER DATE AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON ENV. MANAGER 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. I 1001 AND 33 914 :734-5208 CHRIS, ENGLISH SIGNATURE OF PRINCIPAL EXECUTIVE U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 NUMBER YEAR. MO DÁY OFFICER OR AUTHORIZED AGENT TYPED OR PRINTED and or maximum imprisonment of between 6 months and 5 years.)

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

USE PARAMETER LISTED AS LITHIUM TO REPORT LITHIUM HYDROXIDE. SEE PERMIT FOR THERMAL EFFLUENT LIMITS.
TO REPORT EFFLUENT TEMPERATURE FOR THE REPORTING PERIOD JULY 1-APRIL 14, USE PARAMETER 00011 W.

TO REPORT EFFLUENT TEMPERATURE FOR THE REPORTING PERIOD APRIL 15-JUNE 30, USE PARAMETER 00011 S.

EPA Form 3320-1 (08-95) Provious editions may be used.

PAGE 10

DISCHARGE MONITORING REPORT (DMR) ACTION LEVELS-CNDONENOS PO40-0004 NAME CONSULIDATED EDISON OF NY (SUBR 03) ADDRESS INDIAN POINT STATION #1,2 & 3 NY0004472 PERMIT NUMBER DISCHARGE NUMBER F - FINAL BROADWAY & BLEAKLEY AVE MAJOR **BUCHANAN** NY 10511 MONITORING PERIOD FACILITY INDIAN POINT STATION #1,2 & 3 YEAR MO DAY YEAR МО DAY **LOCATION BUCHANAN** FROM · 98 *** NO DISCHARGE NY 10511 97 10 01 TO 03 31 NOTE: Read instructions before completing this form. (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) ATTN: RAYMOND BURNS QUANTITY OR LOADING (4 Card Only) QUANTITY OR CONCENTRATION (3 Card Only) FREQUENCY NO. SAMPLE **PARAMETER** (54-61) (54-61) (38-45)(46-53) (46-53)EX **TYPE** (32-37) **ANALYSIS** UNITS **AVERAGE MAXIMUM** UNITS MINIMUM **AVERAGE MAXIMUM** (62-63) (64-68)(69-70) SAMPLE (26)***** **** **** FLUORIDE. TOTAL 0-08 KAM-ANIGRAB MEASUREMENT (AS F) PERMIT SENI-GRAB 00951 V 0 0 **** 5.0 REQUIREMENT *** DAILY MX LBS/DY ANNUA SEE COMMENTS BELOW SAMPLE **** (19)COPPER. TOTAL SEMI-AN GRAB 0.03 MEASUREMENT (AS CU) PERMIT 1.0 SEMI-GRAB 01042 V 0 0 REQUIREMENT ANNUA DAILY MX MG/L SEE COMMENTS RELOW SAMPLE (19) IRON. TOTAL 1.0 SENHWURAB MEASUREMENT (AS FE) PERMIT ***** 4.0 SEMI- GRAB 01045 V 0 0 REQUIREMENT DAILY MX MG/L ANNUA SEE COMMENTS BELOW **** SAMPLE **MEASUREMENT** PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT TELEPHONE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND DATE AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR FNY. MANAGER 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 CHRIS, ENGLISH THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. \$ 1001 AND 33 SIGNATURE OF PRINCIPAL EXECUTIVE U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 NUMBER TYPED OR PRINTED OFFICER OR AUTHORIZED AGENT YEAR MO DAY and or maximum imprisonment of between 6 months and 6 years.) COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) REPORT ACTION LEVELS FOR OUTFALL OOIL - HIGH TDS TANK (CONDENSATE POLISHER REGENERATION SYSTEM) ABOVE.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

HONITOR LOCATION "V"= ACTION LEVEL.

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

Form Approved.

ERMITTEE NAME/ADDRESS (Include Facility Name/Location (/ Different) AME CONSOLIDATED EDISON OF NY DDRESS INDIAN POINT STATION #1,2 & 3			NY0004472 001 J				FLOOR DRAINS (SUBR 03)			Form Approved. OMB No. 2040-0004 Approved 22145-05-31-98			
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EPA Form 3320-1 (08-95) Previous editions may be used.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)			DISCH	iarge moi	TEM (NPDES) (DMR)	Form Approved					
NAME CONSOLIDATED EDISON OF NY		(2-16) (17-19) NY0004472 001 I				CONDENSER COOLINGONBANCE 2040-0004 (SUBR 03) Approved Springe 05-31-98					
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REFER TO NOTE "O" ON	PAGE 9	OF THE PERM	IT FOR SPE	CIAL R	EPORTING P	REQUIREMENT	rs.				

Form Approved.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (f Different) NAME CONSOLIDATED EDISON OF NY ADDRESS INDIAN POINT STATION #1,2 & 3 BROADWAY & BLEAKLEY AVE BUCHANAN NY 10511 ACILITY INDIAN POINT STATION #1,2 & 3			NY000 PERM	IIT NUMBER MONI	ILTER BACK SUBR 03) - FINAL AJOR	Form Approved. OMB No. 2040-0004 Approved 2014-05-31-98						
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(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

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ERMITTEE NAME/ADDRESS (Include Facility Name/Location (FD(Gerent)) AME CONSOLIDATED EDISON OF NY DDRESS INDIAN POINT STATION #1,2 & 3 BROADWAY & BLEAKLEY AVE			NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR) (2-16) SUM OF OUTFALLS ON BY 2940-800411 Approval 472 PERMIT NUMBER DISCHARGE NUMBER F - FINAL										
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OCATION BUCHANAN NY 10511			FROM 98 03 01 TO 98 03 31 *** NO DISCHARGE ***										
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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) Form Approved. DISCHARGE MONITORING REPORT (DMR) SECONDARY DEMINERS/MBINERS/48-6004 CONSOLIDATED EDISON OF NY ADDRESS INDIAN POINT STATION #1.2 & 3 NY0004472 (SUBR 03) 001 C PERMIT NUMBER DISCHARGE NUMBER F - FINAL BROADWAY & BLEAKLEY AVE BUCHANAN NY 10511 SOLAM. MONITORING PERIOD FACILITY INDIAN POINT STATION #1.2 & 3 MO DAY YEAR MO DAY LOCATIONBUCHANAN NY 10511 *** NO DISCHARGE FROM 031 01 TO 98 0331 NOTE: Read instructions before completing this form. ATTN: RAYMOND BURNS (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) QUANTITY OR LOADING (3 Card Only) (4 Card Only) QUANTITY OR CONCENTRATION FREQUENCY **PARAMETER** NO. SAMPLE (46-53) (54-61) (38-45) (46-53)(54-61) (32-37) EX **TYPE** ANALYSIS **AVERAGE** MAXIMUM UNITS MINIMUM **AVERAGE MAXIMUM** UNITS (62-63) (64-68) (69-70) SAMPLE FLOW. IN CONDUIT OR (03) **** **** **** THRU TREATMENT PLANTMEASUREMENT PERMIT 50050 1 0 0 REPORT REPURT ***** **** ONCE! INSTAI *** REQUIREMENT EFFLUENT GROSS VALUE BODA AVG DAILY MX MGD *** HONTH 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 CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND **TELEPHONE** DATE 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 ENY, MANAGER CHRIS, ENGLISH THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. \$ 1001 AND 33 SIGNATURE OF PRINCIPAL EXECUTIVE 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.) **TYPED OR PRINTED** OFFICER OR AUTHORIZED AGENT NUMBER **YEAR** MO DAY COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) ENTER RESULTS FOR BETZ CLAM-TROL CT-1 ON BLANK LINE OF THIS FORM

EPA Form 3320-1 (08-95) Previous editions may be used.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(17-19) Form Approved. CONSOLIDATED EDISON OF NY SUM OF DUTFALLS 001 EN & 2010 1004 ADDRESS INDIAN POINT STATION #1,2 & 3 NY0004472 Approval expige 05-31-98 001 M (SUBR 03) BROADWAY & BLEAKLEY AVE PERMIT NUMBER DISCHARGE NUMBER F - FINAL BUCHANAN NY 10511 MAJOR FACILITY INDIAN POINT STATION #1.2 & 3 **MONITORING PERIOD** DAY YEAR MO DAY **LOCATION BUCHANAN** NY 10511 FROM 98 03 98 $\sigma \mathbf{r}$ TO 03 31 *** NO DISCHARGE ! ATTN: RAYMOND BURNS NOTE: Read instructions before completing this form. (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) QUANTITY OR LOADING (3 Card Only) (4 Card Only): QUANTITY OR CONCENTRATION **PARAMETER** FREQUENCY NO. (46-53)(54-61) SAMPLE (38-45) (46-53)(32-37) (54-61) EX TYPE ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM **AVERAGE MAXIMUM** UNITS (62-63) (64-68) (69-70) CHROMIUM, HEXAVALENT SAMPLE **** ***** ***** (19)MEASUREMENT NODI C NODI C (AS CR) MODIC MODIC PERMIT 01032 1 0 0 ***** **** * * * * ***** 0.05 0.1 ONCE/ GRAB REQUIREMENT EFFLUENT GROSS VALUE *** **30DA AVG** DAILY MX MG/L MONTH CHROMIUM. TOTAL SAMPLE **** **** ***** (19)**MEASUREMENT** NODI C (AS CR) NODI C NODI CINDOTT 01034 1 0 0 PERMIT **** **** **** 0.5 1.0 WEEKLYGRAB EFFLUENT GROSS VALUE REQUIREMENT **** DAILY MX MG/L 30DA AVG SAMPLE LITHIUM, TOTAL ***** ***** ***** (19)**MEASUREMENT** 1.62 2.55 0 31 (AS LI) GRAB 01132 1 0 0 PERMIT ***** ***** *** ***** REPORT REPORT ONCE/ GRAB EFFLUENT GROSS VALUE REQUIREMENT **** DAILY AV DAILY MX MG/L MONTH FLOW, IN CONDUIT OR SAMPLE (03)***** **** ***** THRU TREATMENT PLANT MEASUREMENT 0.006 0-006 0 INSTAN 50050 1 PERMIT 0 0 REPORT REPORT ***** ***** ***** VEEKLYINSTAN REQUIREMENT EFFLUENT GROSS VALUE 30DA AVG DAILY MX MGD *** SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT 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 NAME/TITLE PRINCIPAL EXECUTIVE OFFICER **TELEPHONE** DATE ENV, MANAGER 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 CHRIS, ENGLISH 914.734-5208 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 SIGNATURE OF PRINCIPAL EXECUTIVE TYPED OR PRINTED and or maximum imprisonment of between 6 months and 5 years.) OFFICER OR AUTHORIZED AGENT NUMBER YEAR МО COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI C EXPLANATION - THE USE ØF USE PARAMETER LISTED AS LITHIUM TO REPORT LITHIUM HYDROXIDE HAS BEEN DISCONTINUED AT THE THEREFORE NO SAMPLING IS REQUIRED.

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) DISCHARGE MONITORING REPORT (DMR) ION EXCHANGE PLANING No. 2040-0004 NAME CONSOLIDATED EDISON OF NY ADDRESS INDIAN POINT STATION #1,2 & 3 NY0004472 (SUBR 03) DOI F PERMIT NUMBER DISCHARGE NUMBER F - FINAL BROADWAY & BLEAKLEY AVE BUCHANAN NY 10511 MAJOR **MONITORING PERIOD** FACILITY INDIAN POINT STATION #1,2 & 3 MO YEAR DAY YEAR MO DAY LOCATIONBUCHANAN NY 10511 FROM 98 03 01 98 31 *** NO DISCHARGE NOTE: Read instructions before completing this form. ATTN: RAYMOND BURNS (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) QUANTITY OR LOADING (4 Card Only) QUANTITY OR CONCENTRATION (3 Card Only) FREQUENCY **PARAMETER** NO. SAMPLE (46-53) (54-61) (38-45) (46-53)(54-61) EX (32-37) TYPE ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM **AVERAGE** MAXIMUM UNITS (62-63) (64-68) (69-70) SAMPLE FLOW, IN CONDUIT OR (03)0-071 0.031 INSTAN THRU TREATMENT PLANT MEASUREMENT PERMIT 50050 1 0 0 REPURT REPORT **VEEKLY ENST** **** REQUIREMENT EFFLUENT GROSS VALUE **BVA AUG** DAILY MX MGD **** 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 **TELEPHONE** DATE MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR ENY, MANAGER 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 CHRIS, ENGLISH THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. \$ 1001 AND 33 SIGNATURE OF PRINCIPAL EXECUTIVE U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 NUMBER TYPED OR PRINTED **YEAR** and or maximum imprisonment of between 6 months and 5 years.) OFFICER OR AUTHORIZED AGENT MO COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Form Approved.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location () Different) NAME CONSOLIDATED EDISON OF NY ADDRESS INDIAN POINT STATION #1,2 & 3 BROADWAY & BLEAKLEY AVE BUCHANAN NY 10511 FACILITY INDIAN POINT STATION #1,2 & 3 OCCATION BUCHANAN NY 10511 ATTN: RAYMOND BURNS			NY000 PERM YEAR FROM 98	MONI MO DA 03 0	(17-19) (17-19	OILER BLOW SUBR 03) — FINAL AJOR ** NO DISC	Form Approved. OMB No. 2040-0004 Approved 2010-05-31-98				
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