

Tennessee Valley Authority, Post Office Box 2000, Soddy Daisy, Tennessee 37384-2000

April 13, 2010

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

Dear Mr. Patrick Cromer:

SEQUOYAH NUCLEAR PLANT - DISCHARGE MONITORING REPORT FOR MARCH 2010

Enclosed is the March 2010 Discharge Monitoring Report for Sequoyah Nuclear Plant. If you have any questions or need additional information, please contact Ann Hurt at (423) 843-6714 or Stephanie Howard at (423) 843-6700 of Sequoyah's Environmental staff.

Sincerely,

Kenneth Langdon Plant Manager Sequoyah Nuclear Plant

Enclosure cc (Enclosure): Chattanooga Environmental Field Office Division of Water Pollution Control State Office Building, Suite 550 540 McCallie Avenue Chattanooga, Tennessee 37402-2013

U.S. Nuclear Regulatory Commission ATTN: Document Control Desk Washington, D.C. 20555

PERMITTEE NAME/ADDRESS (Include F Name TVA - SEQUOYAH NUCLEA		if Different)	NATIONAL POLL	MAJOR (SUBR 01)			Form Approved. OMB No. 2040-0004					
Address P.O. BOX 2000 (INTEROFFICE SB-2A-SQN)			TN	0026450		101 G	F - FINAL					
		- 	PERM	IT NUMBER	R DISCHAR		DIFFUSER DISCH	HARGE				
Facility	<u>LANT</u>			MON			EFFLUENT					
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ATTN: Stephanie A. Howard			From 10	03 0	1 To 10	03 31	*** NO DISCHA NOTE: Read in		L		ting this for	m
PARAMETER		QUA	NTITY OR LOADING			QUALITY OR CO	DNCENTRATION			NO.	FREQUENCY OF	SAMPLE
· ·		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UI	VITS	EX	ANALYSIS	TYPE
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	******	******	**	*****	*****	14.0	· · ·	04	0	31 / 31	MODELD
00010 Z 0 0	PERMIT	******	*******	****	*******	*******	30.5	DE	G. C.		SEE	CK REQ
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TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	******	******	**	******	******	3.1		24	0	31 / 31	CALCTD
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EFFLUENT GROSS VALUE	REQUIREMENT				MINIMUM		MAXIMUM					
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******	**	******	6	6		19	0	1 / 31	GRAB
00530 1 0 0	PERMIT	*******	******	****	*******	30	100	M N	G/L		MONTHLY	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT					MO AVG						
OIL AND GREASE	SAMPLE MEASUREMENT	*****	******	**	******	<5	<5		19	0	1 / 31	GRAB
00556 1 0 0	PERMIT	*******	******	****	******	15	20	M	G/L	T I	MONTHLY	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT					MO AVG						
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	******	1568	03	******	******	******		••	0	31 / 31	RCORDR
50050 1 0 0	PERMIT	*******	REPORT	MGD	*******	*******	*******	*	***		CONTIN	RCORDR
EFFLUENT GROSS VALUE	REQUIREMENT		DAILY MX								UOUS	
NAME/TITLE PRINCIPAL EXECUTIVE OF	FICER I Certify under	penalty of law that this do	cument and all attachment	ts were prepare	ed under my	in		т	LEPHON		•	DATE
Christopher R. Church	direction or sup	ervision in accordance w	ith a system designed to a ition submitted. Based on i	ssure that qual	ified personnel	4	1-	10	LEFION			
Sequoyah Site Vice President	persons who m information, the accurate, and c	anage the system, or those information submitted is complete. I am aware that	se persons directly respon , to the best of my knowled there are significant penal	sible for gather dge and belief, Ities for submitt	ing the true, ing false SIG	Sequoyah Pla	nt Manager CIPAL EXECUTIVE	423	843-7	7001	10	04 12
TYPED OR PRINTED	information, inc	adding the possibility of th	ne and imprisonment for kr	nowing violatio	ns. C	FFICER OR AUTH		AREA	NUM	BER	YEAR	MO DAY

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments her

No closed mode operation. The following information is included in an attachment: 1. CCW data 2. veliger monitoring data

DMR Attachment

CCW Data

CCW TRENCH		·		
Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
	No water would come out of the	pump. No sample could b	e obtained.	
CCW CHANNEL				
Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
03/10/2010 @ 1130	<0.10 mg/l	03/12/2010 @ 0208	JDB	EPH

						-		-				•
										· .		
	Sample Date	Mean # of ZM/m3	% Settlers	Water Temp. (°C)	Sample Date	Mean# of Asiatic Clams/m3	Water Temp. (°C)	LOCATION	SUB LOCATION	NOTES: % Gravid Asiatic Clam	COLLECTED BY	27
	11/03/2009	133	0	16	11/03/2009	76	16	Inplant	RCW		CMW	_
	11/10/2009	417	6.1	16	11/10/2009	25	16	Inplant	RCW		CMW	
	11/17/2009	269	0	16	11/17/2009	0	16	Inplant	RCW		CMW	
	11/24/2009	36	50	15	11/24/2009	18	15	Inplant	RCW		CMW	
	12/01/2009	32	0	13.5	12/01/2009	0	13.5	Inplant	RCW		WE	
	12/08/2009	38	0	11	12/08/2009	. 0	11	Inplant	RCW		CMW	
	01/05/2010	0	0	6	01/05/2010	0	6	Inplant	RCW		В	
	01/12/2010	0	0	5	01/12/2010	0	5	Inplant	RCW			
	01/19/2010	0	· 0	6	01/19/2010	0	6	Inplant	RCW		Р	
	01/26/2010	32	0	7.5	01/26/2009	0	7.5	Inplant	RCW		NRT	
•	02/02/2010	0	0	7	02/02/2010	Ō	7	Inplant	RCW		MSW/WDT	
	02/09/2010	0	0	8	02/09/2010	0	8	Inplant	RCW		BL/TC	
	02/16/2010	0	0	5	02/16/2010	0	5	Inplant	RCW		BJ	
	02/23/2010	11.7	0	7	02/23/2010	· 0	7	Inplant	RCW		BJ	
· .	03/02/2010	0	0 ·	6	03/02/2010	0	6	Inplant	RCW		PB	
	03/09/2010	0	0	8 -	03/09/2010	0	8	Inplant	RCW		MJW	
	03/16/2010	0	0	10	03/16/2010	0	10	Inplant	RCW		BC	
•	03/23/2010	14	0	- 11	03/23/2010	0	11	Inplant	RCW		BC	
	03/30/2010	0	Ó	14	03/30/2010	0	14	Inplant	RCW		BAPO	
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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) Name TVA - SEOUOYAH NUCLEAR PLANT Address P.O. BOX 2000			NATIONAL POLLU	(SUBR 01)			Form Approved.				
(INTEROFFICE SB-2A-SQN)			Contraction of the local division of the loc	026450		101 G	F - FINAL				
SODDY - DAISY, TN 37384			PERMI		DISCHAR	GE NUMBER	DIFFUSER DISCHAI	RGE			
Facility	PLANI			MON	ITORING PERIOD	······	EFFLUENT				
ATTN: Stephanie A. Howard	<u></u>		From 10	MO DA 03 0'	Y YEAR	MO DAY 03 31	*** NO DISCHARC	<u> </u>	***		
PARAMETER		QUA	TITY OR LOADING			QUALITY OR CO	NOTE: Read instru INCENTRATION	uctions before	NO.	FREQUENCY	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EN	ANALYSIS	ITPE
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****	0.018	0.027	19	0	12 / 31	GRAB
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*****	****	******	0.10 MO AVG	0.10 INST MAX	MG/L		WEEK-	CALCTD
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	******	0	62	******	*******		**	0	31 / 31	CALCTD
82234 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	2 DAILY MX	DEG C/HR	******	*******	******	· ****			CALCTD
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT	and a subsection of the subsec				-					
	PERMIT REQUIREMENT										
}	SAMPLE MEASUREMENT								25. m. 2004		
· .	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OF			ument and all attachments			_10	1	TELEPH	ONE		DATE
Christopher R. Church	property gather an persons who man	nd evaluate the informat age the system, or those	h a system designed to as ion submitted. Based on n e persons directly respons to the best of my knowled	ny inquiry of th sible for gather	e person or ing the	Sequoyah Pla	nt Manager	423 843	3-7001	10	04 12

Sequoyah	Site	Vice	President
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TYPED OR PRINTED

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments her

The following injection occured: Biodetergent 73551 (max. calc. conc. was 0.020mg/L--limit 2.0mg/L)

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.

YEAR

MO

DAY

AREA CODE

SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

NUMBER

PERMITTEE NAME/ADDRESS (Include F Name TVA - SEQUOYAH NUCLEA		f Different)	No.		ARGE ELIMINATION SY		MAJOR (SUBR 01)			orm Approved MB No. 2040-	
Address P.O. BOX 2000 (INTEROFFICE SB-2A-SQN)			TNO	026450		101 Q	F - FINAL				
SODDY - DAISY. TN 37384			PERMI		DISCHARC	CE NUMBER	DIFFUSER DISCHAR	RGE			
FacilityTVA - SEQUOYAH NUCLEAR P	LANT		· · · · · · · · · · · · · · · · · · ·				EFFLUENT				
LOCATIO HAMILTON COUNTY			YEAR		TTORING PERIOD	MO DAY	· · · · · ·				
ATTN: Stophanic A. Howard			From 10	01 0		03 31	*** NO DISCHARC	SE	***		
ATTN: Stephanie A. Howard				01 0		00 01	NOTE: Read instru	uctions befor	e comp	eting this form	۱.
PARAMETER		QUA	NTITY OR LOADING			QUALITY OR CO	INCENTRATION		NO. EX	FREQUENCY OF	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
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	PERMIT REQUIREMENT										

	I Certify under penalty of law that this document and all attachments were prepared under my		TE	LEPHONE		DATE	
Christopher R. Church	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,	Sequoyah Plant Manager	423	843-7001	10	04	12
	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.	SIGNATURE OF PRINCIPAL EXECUTIVE					
TYPED OR PRINTED		OFFICER OR AUTHORIZED AGENT	AREA	NUMBER	YEAR	мо	DAY

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments her Boron was sampled on 01/06/2010.

PERMITTEE NAME/ADDRESS (Include) Name TVA - SEQUOYAH NUCLE/	Different)	DISCHARGE MONITORING REPORT (DMR)				ES) MAJOR Form Approved. (SUBR 01) OMB.No. 2040-0004					
Address P.O. BOX 2000			TNO	026450		101 T	F - FINAL				
						E NUMBER	BIOMONITORING F	OR OUTEA	UL 10 ⁴	1	
FacilityTVA - SEQUOYAH NUCLEAR	PLANT						•				
Locatio HAMILTON COUNTY	<u>`</u>		·		IITORING PERIOD		EFFLUENT				
ATTN: Stephanie A. Howard			From 10	MO DA 01	and here and the second se	MO DAY 03 31	*** NO DISCHAR		***	oting this form	_
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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	ITPE
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	******	*****	**	Monitoring Not Required	******	******	23			
TRP3B 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	****	45.2 MINIMUM	*******	*******	PERCENT		SEE PERMIT	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	*****	******	**	Monitoring Not Required	******	******	23	- Allower and all	<u>, , , , , , , , , , , , , , , , , , , </u>	
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	SAMPLE MEASUREMENT					·.					
	PERMIT REQUIREMENT										

	I Certify under penalty of law that this document and all attachments were prepared under my	11	ŤE	LEPHONE		DATE		ļ
Christopher R. Church	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,	Sequoyah Plant Manager	423	843-7001	10	04	12	
	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.	SIGNATURE OF PRINCIPAL EXECUTIVE					<u> </u>	
TYPED OR PRINTED		OFFICER OR AUTHORIZED AGENT	AREA	NUMBER	YEAR	мо	DAY	ŀ

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments her* Toxicity was not sampled in March 2010.

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	PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) Name TVA - SEOUOYAH NUCLEAR PLANT			NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) N DISCHARGE MONITORING REPORT (DMR)						orm Approved.	
	R PLANT		DIS	CHARGE MU	NITURING REPORT		(SUBR 01)		. 0	MB No. 2040-	0004
Address P.O. BOX 2000			TNC	026450		103 G	F - FINAL			.•	•
(INTEROFFICE SB-2A-SQN) SODDY - DAISY, TN 37384	·		the second s	·····			LOW VOL. WASTE 1				
Facility	ANT			T NUMBER	DISCHAR			REATIVIED	NI PU	NU	
				MONI	TORING PERIOD		EFFLUENT				
			YEAR	MO DAY	(YEAR	MO DAY	*** NO DISCHARG	E	***	•	
ATTN: Stephanie A. Howard			From 10	_03 01	TO 10	03 31		·			
							NOTE: Read instru	ictions before	T	T	
PARAMETER		QUAI				QUALITY OR CO	NCENTRATION		NO.	FREQUENCY OF	SAMPLE
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PH	SAMPLE MEASUREMENT	*****	******	** , .	7.0	******	8.0	12	0	16 / 31	GRAB
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	CAMPLE			· ·	MINIMUM	_	MAXIMUM	<u>.</u>	1220130	Shelters and Callette	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	62	• 79	26	*******	. 7	9	19	0	5 / 31	GRAB
00530 1 0 0	PERMIT	380	1250	LBS/DY	*******	30	100	MG/L	60.33	WEEKLY	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MX			MO AVG	DAILY MX		S		
OIL AND GREASE	SAMPLE				******	<6			000000	5 / 31	GRAB
OIE AND GREAGE	MEASUREMENT	<52	61	26		0	· <6	19	0	5751	0.010
00556 1 0 0	PERMIT	190	250	LBS/DY	******	15	20	MG/L	1992.00	WEEKLY	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MX	а — А		MO AVG	DAILY MX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1.073	1.253	03	******	*******	******	**	0	31 / 31	TOTALZ
50050 1 0 0	PERMIT	REPORT	REPORT	MGD	******	*******	******	**	19929	SEE	TOTALZ
EFFLUENT GROSS VALUE	REQUIREMENT	and the second second second second second second								PERMIT	
EFFEDENT GROSS VALUE	SAMPLE	MO AVG	DAILY MX						12000000	To See I VIVILIA	
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	PERMIT										1.0000000000000000000000000000000000000
	REQUIREMENT										
			-								

	I Certify under penalty of law that this document and all attachments were prepared under my		TE	LEPHONE		DATE	
Christopher R. Church	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.	Sequoyah Plant Manager	423	843-7001	10	04	12
	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.	SIGNATURE OF PRINCIPAL EXECUTIVE	455.4	AU 19 40 50	VEAD	140	DAY
TYPED OR PRINTED		OFFICER OR AUTHORIZED AGENT	AREA	NUMBER	YEAR	мо	DAY

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments her

PERMITTEE NAME/ADDRESS (Include F Name TVA - SEQUOYAH NUCLEA		Different)	NATIONAL POLLU	MAJOR Form Approved. (SUBR 01) OMB No. 2040-0004				-			
Address P.O. BOX 2000 (INTEROFFICE SB-2A-SQN)			TNO	026450		107 G	F - FINAL				
SODDY - DAISY. TN 37384			PERMI		DISCHAR	GE NUMBER	METAL CLEANING	WASTE PO	DND		
FacilityTVA - SEQUOYAH NUCLEAR F	PLANT			MON	ITORING PERIOD		EFFLUENT				
Locatio HAMILTON COUNTY			YEAR			MO DAY					
ATTN: Stephanie A. Howard			From 10	03 04		03 31	*** NO DISCHAR			eting this form	n.
PARAMETER		QUA	NTITY OR LOADING			QUALITY OR CO	ONCENTRATION		NO. EX	FREQUENCY	SAMPLE TYPE
· .		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	1176
PH	SAMPLE MEASUREMENT	******	*****	**		******		12			
00400 1 0 0	PERMIT	******	******	****	6.0	*******	9.0	SU		DAILY	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT				MINIMUM		MAXIMUM				
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	******	, * *	****	******		19			
00530 1 0 0	PERMIT	*******	*******	****	******	*******	30	MG/L	62.53	DAILY	COMPOS
EFFLUENT GROSS VALUE	REQUIREMENT						DAILY MX				
OIL AND GREASE	SAMPLE MEASUREMENT	******	*****	**	*****	******		19			
00556 1 0 0	PERMIT	******	*******	****	*******	*******	15	MG/L	1936	DAILY	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT						DAILY MX				
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EFFLUENT GROSS VALUE	REQUIREMENT						DAILY MX				
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01045 1 0 0	PERMIT	******	*******	****	*******	*******	1.0	MG/L	0305	DAILY	COMPOS
EFFLUENT GROSS VALUE	REQUIREMENT						DAILY MX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	*****	*******	*****	**			
50050 1 0 0	PERMIT	REPORT	REPORT	MGD	*******	*******	*******	****		DAILY	CALCTD
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MX					<u> </u>			
NAME/TITLE PRINCIPAL EXECUTIVE OF	FICER I Certify under pe	nalty of law that this do	ocument and all attachment	s were prepare	ed under my			TELEPH	IONE		DATE
Christopher R. Church	direction or super	rvision in accordance w	rith a system designed to a ation submitted. Based on r	ssure that qual	lified personnel	-62-	1- 1				
	persons who mar	hage the system, or tho	se persons directly respon-	sible for gather	ring the	Sequoyah Pla	ant Manager	423 84	13-7001	10	04 12

Sequoyah Site Vice President

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 ~, SIGNATURE OF PRINCIPAL EXECUTIVE information, including the possibility of fine and imprisonment for knowing violations. OFFICER OR AUTHORIZED AGENT

423 AREA CODE

TYPED OR PRINTED COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments her

No Discharge this Period

YEAR MO

DAY

NUMBER

PERMITTEE NAME/ADDRESS (Include Facility Name/Location Name TVA - SEQUOYAH NUCLEAR PLANT Address P.O. BOX 2000		Different) NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)			MAJOR (SUBR 01)			Form Approved.			
(INTEROFFICE SB-2A-SQN)		•	TNO	026450		110 G	F - FINAL				
SODDY - DAISY TN 37384			PERMIT NUMBER DISCHARGE NUMBER RECYCLED COOLING W						ł		
FacilityTVA - SEQUOYAH NUCLEAR P	LANT		EKUI								
Locatio HAMILTON COUNTY					ITORING PERIOD		EFFLUENT				
ATTN: Stephanie A. Howard			From 10	MO DAY 03 01		MO DAY 03 31	*** NO DISCHARC	·	***	Ation this form	•
PARAMETER		OUANTITY OR LOADING OUALITY OR CONCENTRA						Ictions befor	NO.	FREQUENCY	SAMPLE
		Q0A				OUALITY OR C	ONCENTRATION		EX	OF	TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	******	*****	04	*****	******		04			
00010 Z 0 0	PERMIT	*******	*******	DEG C	*******	*******	38.3	DEG C	2000	DAILY	GRAB-4
INSTREAM MONITORING	REQUIREMENT						DAILY MX				
РН	SAMPLE MEASUREMENT	******	******	**		******		12	51-3 <u>5</u> 5.38-5		Confidence of parts and
00400 1 0 0	PERMIT	*******	*******	****	6.0	*******	9.0	su		WEEKLY	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT				MINIMUM		MAXIMUM				
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******	**	******	******		19	2 CLAPACING		<u></u>
00530 1 0 0	PERMIT	******	******	****	*******	*******	30	MG/L		DAILY	COMPOS
EFFLUENT GROSS VALUE							DAILY MX		0.8%	0.00000000	<u>1996/2460</u>
OIL AND GREASE	SAMPLE MEASUREMENT	******	******	**	*****	******		19			-
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	****	*******	*******	15 DAILY MX	MG/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	<u></u>	<u></u>	03	******	******	******	**	Post wells		
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*******	******	*******	, 1113		DAILY	CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******	**	*****	******		19			
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	****	******	*****	0.10 DAILY MX	MG/L		WEEKLY	GRAB-4
	SAMPLE MEASUREMENT				-						
	PERMIT REQUIREMENT										

	I Certify under penalty of law that this document and all attachments were prepared under my		TE	LEPHONE			
	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	Seguoyah Plant Manager	423	843-7001	10		12
	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	SIGNATURE OF PRINCIPAL EXECUTIVE	423	643-7001	001 10 04 1	12	
TYPED OR PRINTED	information, including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	мо	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments her

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) Name TVA - SEQUOYAH NUCLEAR PLANT Address P.O. BOX 2000			NATIONAL POLLU	UTANT DISCHA	MAJOR (SUBR 01)		Form Approved. OMB No. 2040-0004				
(INTEROFFICE SB-2A-SQN) SODDY - DAISY TN 37384 Facility TVA - SEQUOYAH NUCLEAR PI		,	TNO	F - FINAL RECYCLED COOLING WATER							
			YEAR		ITORING PERIO	D MO DAY	EFFLUENT				
ATTN: Stephanie A. Howard		•	YEAR MO DAY YEAR MO DAY From 10 03 01 TO 10 03 31				*** NO DISCHA NOTE: Read in	*** e comple	**		
PARAMETER		QUANTITY OR LOADING				QUALITY OR C	ONCENTRATION	RATION			SAMPLE TYPE
		AVERAGE	MAXIMUM UNITS		MINIMUM AVERAGE		MAXIMUM	UNITS		ANALYSIS	
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****	**		******	******	23			
TRP3B 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	****	45.2 MINIMUM	*******	*******	PERCENT		SEMI ANNUAL	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	- ******	*****	**		*****	******	23			
TRP6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	******	****	45.2 MINIMUM	******	*******	PERCENT		SEMI ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
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•	SAMPLE MEASUREMENT							0.745			The action of the second states
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT								700 7.67.90		
·	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OF			ment and all attachments were prepared under my a system designed to assure that gualified personnel			1 -	TELEPH	TELEPHONE		DATE	
Christopher R. Church Sequoyah Site Vice President	properly gather an persons who man information, the in	nd evaluate the informa age the system, or thos iformation submitted is	ition submitted. Based on r se persons directly respon , to the best of my knowled	my inquiry of the sible for gatheri dge and belief, t	e person or ng the true,	Sequoyah Pla		423 84	3-7001	10	04 12
		there are significant penal ne and imprisonment for kr			GNATURE OF PRIN	ICIPAL EXECUTIVE	AREA N		YFAR	MO DAY	

TYPED OR PRINTED COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments her

No Discharge this Period

YEAR

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DAY

AREA CODE

NUMBER

OFFICER OR AUTHORIZED AGENT

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) Name TVA - SEQUOYAH NUCLEAR PLANT Address P.O. BOX 2000 (INTEROFFICE SB-2A-SQN) SODDY - DAISY. TN 37384 Facility TVA - SEQUOYAH NUCLEAR PLANT			NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) —— DISCHARGE MONITORING REPORT (DMR)					MAJOR SUBR 01)	Fo	d. 0-0004	•		
			TN0026450 PERMIT NUMBER DISCH				116 G F - FINAL ISCHARGE NUMBER BACKWASH						
Locatio HAMILTON COUNTY			YEAR		ITORING P			EFFLUENT					
ATTN: Stephanie A. Howard	TTN: Stephanie A. Howard			MO DA 03 01		(EAR M 10 0		*** NO DISCHAI NOTE: Read ins	· · · · ·	fore compl	* ompleting this form.		
PARAMETER		QUAN	ANTITY OR LOADING MAXIMUM UNITS		QUALITY OR C			CENTRATION	···· , · ··	NO. EX	FREQUENCY	SAMPL	
		AVERAGE			MINIMUM AVERACE		AVERAGE	MAXIMUM	UNITS		ANALYSIS		
DEBRIS, FLOATING (SEVERITY)	SAMPLE MEASUREMENT	******	******	**	*****	**	******	0	9A	0	1/31	VISUA	۸L
01345 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	*******	****	*****	**	******	REPORT MO TOTAL	PASS= FAIL=	2012/07/2012/07	SEE PERMIT	VISUA	۹Ľ
OIL AND GREASE VISUAL	SAMPLE MEASUREMENT	*******	<u>ب</u>	94	*****	**	*****	******	**	0	1 / 31	VISUA	۹L
84066 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	REPORT MO TOTAL	YES=1 NO=0	*****	**	*******	*******	****		SEE PERMIT	VISUA	۹L.
	SAMPLE MEASUREMENT			· .			•						
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 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							6	1	TELE	TELEPHONE		DATE	
Christopher R. Church	properly gather a persons who mar	properly gather and evaluate the information submitted. Based on my inquiry of the person 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,								843-7001	10	04 1	12
Sequoyah Site Vice President TYPED OR PRINTED	accurate, and col	mplete. I am aware that t	here are significant pena e and imprisonment for k	Ities for submitt	ing false		URE OF PRINCI		AREA	NUMBER	YEAR	MO D	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments her

Operations performs visual inspections for floating debris and oil and grease during all backwashes.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) Name TVA - SEQUOYAH NUCLEAR PLANT Address P.O. BOX 2000 (INTEROFFICE SB-2A-SQN)		Different)		TANT DISCH	MAJOR (SUBR 01) F - FINAL	01) OMB No. 2040-0004						
		·	·		DISCHAR	BACKWASH						
Facility TVA - SEQUOYAH NUCLEAR PL Locatio HAMILTON COUNTY	<u>ANT</u>			EFFLUENT								
ATTN: Stephanie A. Howard			From 10	MO DA 03 0 ⁴		MO DAY 03 31	*** NO DISCHARGE			***		
PARAMETER	QUA	QUANTITY OR LOADING			QUALITY OR CO	NOTE: Read instru	Ictions befor	NO.	FREQUENCY			
		AVERAGE	AVERAGE MAXIMUM UNITS		MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE	
DEBRIS, FLOATING (SEVERITY)	SAMPLE MEASUREMENT	******	******	** '	******	******	0	9A	0	1 / 31	VISUAL	
01345 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	******	****	*******	*******	REPORT MO TOTAL	PASS=0 FAIL=1		SEE	VISUAL	
OIL AND GREASE VISUAL	SAMPLE MEASUREMENT	*****	0 ·	94	*****	******	*******	** .	0	1 / 31	VISUAL	
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	SAMPLE MEASUREMENT						· · · · · · · · · · · · · · · · · · ·					
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	SAMPLE MEASUREMENT								Skamp	26(202-00)		
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	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFF	ICER Certify under per	nalty of law that this doc	ument and all attachments	s were prepare	ed under my			TEI EPH	ONE			

	I Certify under penalty of law that this document and all attachments were prepared under my	10.	TE	LEPHONE		j	
Christopher R. Church	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	\mathcal{A}					
	information, the information submitted is , to the best of my knowledge and belief, true,	Sequoyah Plant Manager	423	843-7001	10	04	12
	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.	SIGNATURE OF PRINCIPAL EXECUTIVE					
TYPED OR PRINTED	a moundation, including the possibility of the and http://sofinent.to.knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	мо	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments her*) Operations performs visual inspections for floating debris and oil and grease during all backwashes.

PERMITTEE NAME/ADDRESS (Include Fa Name TVA - SEQUOYAH NUCLEAN Address P.O. BOX 2000					REE ELIMINATION SYSTEM (NPDES) MAJOR ITORING REPORT (DMR) (SUBR 01)					Form Approved. OMB No. 2040-0004					
(INTEROFFICE SB-2A-SQN)	•	TN0026450			118 G F-FINAL			FINAL							
		PERMI	T NUMBER	DISC	HARGE NUMB	BER V	VASTEWATER &	STOR	M WAT	ER					
Facility TVA SEQUOYAH NUCLEAR PL Locatio HAMILTON COUNTY			MON				FFLUENT								
			YEAR	MO DA			AY	*** NO DISCHA			***				
ATTN: Stephanie A. Howard			From 10	03 01	To 1	0 03 3	51								
PARAMETER		OILA						NOTE: Read in	structions	s before		REQUENCY	1		
,		QUANTITY OR LOADING				QUALITY	UK CUNC	ENTRATION			NO. F	OF		APLE APE	
		AVERAGE	MAXIMUM	UNITS	MINIMUN	AVER	RAGE	MAXIMUM	U	ITS		ANALYSIS			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	**		****	****	******		19					
00300 1 0 0	PERMIT	******	*******	****	2.0	****	****	*****	M	G/L		TWICE/	GF	RAB	
EFFLUENT GROSS VALUE	REQUIREMENT				DAILY N	IN						WEEK			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	******	**	*******	* ***	****			19					
00530 1 0 0	PERMIT	******	*******	****	*****	****	****	100	M	G/L	6783 k	TWICE/	GF	RAB	
EFFLUENT GROSS VALUE	REQUIREMENT							DAILY MX				WEEK		•	
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	*****	**	******	****	****		2	25		۰.			
00545 1 0 0	PERMIT	******	*******	****	*******	****	****	1.0	м	UL		ONCE/	GF	RAB	
EFFLUENT GROSS VALUE	REQUIREMENT							DAILY MX		2009.40 P		MONTH			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	******	****	****	******		**					
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT	MGD	*******	****	****	******		* .	80,223 (3)	ONCE/ BATCH	ES	TIMA	
	SAMPLE MEASUREMENT	MO AVO	DAILY MX							3		DATON	7 99 9 6 8 9	<u> 984.4.375</u>	
	PERMIT REQUIREMENT														
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NAME/TITLE PRINCIPAL EXECUTIVE OFF	ument and all attachment	s were prepared	d under mv				тс				DATE	·]			
Christopher R. Church	h a system designed to a ion submitted. Based on r	ssure that qualit my inquiry of the	fied personnel			\mathcal{N}		TELEPHONE							
Sequoyah Site Vice President	information, the i accurate, and co	information submitted is , mplete. I am aware that t	se persons directly responsible for gathering the s, to the best of my knowledge and belief, true, t there are significant penalties for submitting faine and imprisonment for knowing violations.		ng false	ng false SICNATURE OF PRIN		AL EXECUTIVE	423		7001	10	04	12	
TYPED OR PRINTED					OFFICER OR AUTHORIZED AGENT				AREA NUMBER		YEAR	MÒ	DAY		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments her

During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall.

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