



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

April 12, 2011

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 2011

Enclosed is the March 2011 Discharge Monitoring Report for Sequoyah Nuclear Plant. Sample collection continues at the Diffuser Pond Inlet of the Yard Drainage Pond effluent because of a transformer oil spill that reached the Yard Drainage Pond. Samples collected from 9/23/2010 through 3/19/2011 have all yielded results below detection limits for oil and grease. If you have any questions or need additional information, please contact Brad Love at (423) 843-6714 or Stephanie Howard at (423) 843-6700 of Sequoyah's Environmental staff.

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.

Sincerely,

Michael D. Skaggs
Site Vice President
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, DC 20555

IE25
NRR

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
12/07/2010	6	100	23	12/07/2010	0	23	1-25-545			PB
12/14/2010	0	0	10	12/14/2010	0	10	1-25-545			RS
12/22/2010	0	0	10.5	12/22/2010	0	10.5	1-ISV-24-1234			WE
12/29/2010	0	0	26	12/29/2010	0	26	1-25-545			WDT
01/04/2011	0	0	13	01/04/2010	0	13	1-25-545			PB
01/11/2011	0	0	22	01/11/2010	0	22	1-25-545			RS
01/18/2011	0	0	9.5	01/18/2010	0	9.5	1-ISV-24-1234			CR
01/25/2011	0	0	23	01/25/2011	0	23	1-25-545			WDT
02/02/2011	0	0	10	02/02/2011	0	10	1-25-545			PB
02/08/2011	0	0	9	02/08/2011	0	9	1-25-545			MJW
02/15/2011	0	0	23	02/15/2011	0	23	1-25-545			MLW
02/22/2011	20	100	10	02/22/2011	0	10	1-25-545			PB
03/01/2011	0	0	11	03/01/2011	0	11	1-ISV-24-1236			PB
03/08/2011	0	0	11	03/08/2011	0	11	1-ISV-24-1236			WE
03/16/2011	22	0	11	03/16/2011	0	11	1-ISV-24-1234			MLW
03/23/2011	0	0	11	03/23/2011	0	11	1-ISV-24-1234			MLW
03/30/2011	0	0	12	03/30/2011	0	12	1-15v-24-1236			MLW

Name **TVA - SEQUOYAH NUCLEAR PLANT**
Address **P.O. BOX 2000**
(INTEROFFICE SB-2A-SQN)
SODDY - DAISY, TN 37384
Facility **TVA - SEQUOYAH NUCLEAR PLANT**
Locatio **HAMILTON COUNTY**

TN0026450 **101 G**
PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD
From

YEAR	MO	DAY
11	03	01

 To

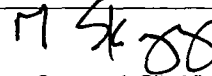
YEAR	MO	DAY
11	03	31

EFFLUENT
*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: Stephanie A. Howard

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 EFFLUENT GROSS	*****	*****	**	*****	*****	28.6	04	0	31 / 31	RCORDR
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	Req. Mon. DAILY MAX	DEG. C.		CONTI NUOUS CALCTD
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 0 INSTREAM MONITORING	*****	*****	**	*****	*****	14.0	04	0	31 / 31	MODELD
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.5 DAILY MX	DEG. C.		CONTI NUOUS CALCTD
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C 00016 1 1 EFFLUENT GROSS	*****	*****	**	*****	*****	1	04	0	31 / 31	CALCTD
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	5 DAILY MX	DEG. C.		CONTI NUOUS CALCTD
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS	*****	1642	03	*****	*****	*****	**	0	31 / 31	RCORDR
	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MAX	MGD	*****	*****	****			CONTI NUOUS RCORDR
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS	*****	*****	**	*****	0.011	0.024	19	0	16 / 31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	0.1 MO AVG	0.1 DAILY MAX	MG/L		FIVE PER WEEK CALCTD
TEMPERATURE - C, RATE OF CHANGE 82234 1 0 EFFLUENT GROSS	*****	0	62	*****	*****	*****	**	0	31 / 31	CALCTD
	PERMIT REQUIREMENT	*****	2 DAILY MX	DEG C/HR	*****	*****	****			CONTI NUOUS CALCTD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Michael D. Skaggs Sequoyah Site Vice President TYPED OR PRINTED	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.	 Sequoyah Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
423 843-7001			11	04	12		

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

No closed mode operation. Veliger monitoring data is included as an attachment. The following injections occurred: Biodetergent 73551 (max. calc. conc. was 0.02mg/L--limit 2.0mg/L)

Name **TVA - SEQUOYAH NUCLEAR PLANT**
 Address **P.O. BOX 2000**
 (INTEROFFICE SB-2A-SQN)
SODDY - DAISY, TN 37384
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**
 Location **HAMILTON COUNTY**

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

MAJOR
 (SUBR 01)
 F - FINAL

Form Approved.
 OMB No. 2040-0004

TN0026450 **101 T**
 PERMIT NUMBER DISCHARGE NUMBER

BIOMONITORING FOR OUTFALL 101
 EFFLUENT

MONITORING PERIOD
 From

YEAR	MO	DAY
11	03	01

 To

YEAR	MO	DAY
11	03	31

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: Stephanie A. Howard

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****	**	Monitoring Not Required	*****	*****	23			
TRP3B 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	****	43.2 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	*****	*****	**	Monitoring Not Required	*****	*****	23			
TRP6C 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	****	43.2 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Michael D. Skaggs
 Sequoyah Site Vice President
 TYPED OR PRINTED

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.

M Skaggs
 Sequoyah Site Vice President
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
423	843-7001	11	04	12
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 Toxicity was not sampled in March 2011.

Name **TVA - SEQUOYAH NUCLEAR PLANT**
 Address **P.O. BOX 2000**
 (INTEROFFICE SB-2A-SQN)
SODDY - DAISY, TN 37384
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**
 Location **HAMILTON COUNTY**

TN0026450	103 G
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
LOW VOL. WASTE TREATMENT POND
EFFLUENT


MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
From 11	03	01	To 11	03	31

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: Stephanie A. Howard

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	**	7	*****	8	12	0	15 / 31	GRAB
00400 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	**	6 MINIMUM	*****	9 MAXIMUM	SU		THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	14	16	19	0	2 / 31	GRAB
00530 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	**	*****	30 MO AVG	100 DAILY MX	MG/L		TWICE/ MONTH	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	**	*****	<5	<6	19	0	2 / 31	GRAB
00556 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	**	*****	15 MO AVG	20 DAILY MX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.964	1.089	03	*****	*****	*****	**	0	31 / 31	RCORDR
50050 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon DAILY MX	MGD	*****	*****	*****	**		SEE PERMIT	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Michael D. Skaggs Sequoyah Site Vice President	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.	 Sequoyah Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED			423	843-7001	11	04	12

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**
 Address **P.O. BOX 2000**
 (INTEROFFICE SB-2A-SQN)
SODDY - DAISY, TN 37384
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**
 Location **HAMILTON COUNTY**

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

MAJOR
 (SUBR 01)
 F - FINAL

Form Approved.
 OMB No. 2040-0004

TN0026450 **110 G**
 PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD
 From

YEAR	MO	DAY
11	03	01

 To

YEAR	MO	DAY
11	03	31

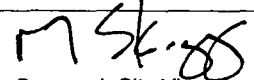
RECYCLED COOLING WATER
 EFFLUENT

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: Stephanie A. Howard

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		04			
	PERMIT REQUIREMENT	*****	*****	**	*****	*****	REPORT DAILY MX	DEG C		CONTINUOUS	CALCULATED
TEMPERATURE, WATER DEG. CENTIGRADE 00010 Z 0 INSTREAM MONITORING	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		04			
	PERMIT REQUIREMENT	*****	*****	**	*****	*****	30.5 DAILY MX	DEG C		CONTINUOUS	CALCULATED
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C 00016 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		04			
	PERMIT REQUIREMENT	*****	*****	**	*****	*****	5 DAILY MX	DEG C		CONTINUOUS	CALCULATED
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****		03	*****	*****	*****	**			
	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	MGD	*****	*****	*****	**		CONTINUOUS	RECORD
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**	*****			19			
	PERMIT REQUIREMENT	*****	*****	**	*****	0.1 MO AVG	0.1 DAILY MX	MG/L		Five per Week	CALCULATED
TEMPERATURE - C, RATE OF CHANGE 82234 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****		04	*****	*****	*****	**			
	PERMIT REQUIREMENT	*****	2 DAILY MX	DEG C	*****	*****	*****	**		CONTINUOUS	CALCULATED
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Michael D. Skaggs Sequoyah Site Vice President TYPED OR PRINTED	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.	 Sequoyah Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			423	843-7001	11	04	12
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 No Discharge this Period.

Name **TVA - SEQUOYAH NUCLEAR PLANT**
 Address **P.O. BOX 2000**
 (INTEROFFICE SB-2A-SQN)
SODDY - DAISY, TN 37384
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**
 Locatio **HAMILTON COUNTY**

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

MAJOR (SUBR 01)
 F - FINAL
 RECYCLED COOLING WATER
 EFFLUENT

Form Approved.
 OMB No. 2040-0004

TN0026450
 PERMIT NUMBER

110 T
 DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
11	03	01	11	03	31

From

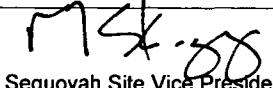
To

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: Stephanie A. Howard

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	23			
TRP3B 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	43.2 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	23			
TRP6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	43.2 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Michael D. Skaggs Sequoyah Site Vice President	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.	 Sequoyah Site Vice President	TELEPHONE		DATE		
			423	843-7001	11	04	12
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 No Discharge this Period

Name **TVA - SEQUOYAH NUCLEAR PLANT**
 Address **P.O. BOX 2000**
 (INTEROFFICE SB-2A-SQN)
SODDY - DAISY, TN 37384
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**
 Location **HAMILTON COUNTY**

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

MAJOR (SUBR 01)
 F - FINAL
 WASTEWATER & STORM WATER
 EFFLUENT

Form Approved.
 OMB No. 2040-0004

TN0026450 **118 G**
 PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD
 From

YEAR	MO	DAY
11	03	01

 To

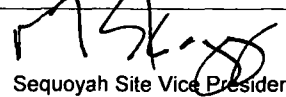
YEAR	MO	DAY
11	03	31

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: Stephanie A. Howard

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO) 00300 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	19			
	PERMIT REQUIREMENT	*****	*****	****	2 MINIMUM	*****	*****	MG/L		TWICE/WEEK	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	100 DAILY MX	MG/L		TWICE/WEEK	GRAB
SOLIDS, SETTLEABLE 00545 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		25			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1 DAILY MX	ML/L		ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT			03	*****	*****	*****	**			
	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	MGD	*****	*****	*****	*		ONCE/BATCH	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Michael D. Skaggs Sequoyah Site Vice President TYPED OR PRINTED	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.	 Sequoyah Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			AREA CODE	NUMBER	YEAR	MO	DAY
			423	843-7001	11	04	12

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall.