

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

May 10, 2012

Ms. Dana Waits
State of Tennessee
Department of Environment and Conservation
Division of Water Pollution Control
Enforcement & Compliance Section
6<sup>th</sup> Floor, L & C Annex
401 Church Street
Nashville, Tennessee 37243-1534

Dear Ms. Waits:

## SEQUOYAH NUCLEAR PLANT - DISCHARGE MONITORING REPORT FOR APRIL 2012

Enclosed is the April 2012 Discharge Monitoring Report for Sequoyah Nuclear Plant. If you have any questions or need additional information, please contact Brad Love at (423) 843-6714 of Sequoyah's Environmental staff.

In a letter to Mr. Vojin Janjić dated December 21, 2011 Sequoyah notified TDEC of upcoming activities for the installation of pilings into bedrock to support a crane during the Unit 2 Cycle 18 refueling outage scheduled to begin in October 2012. This project is on going and to date there has been zero discharge of process water. Sequoyah will continue to update TDEC on this process and report any discharges and associated monitoring in future DMR's.

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.

Site Vice President

Sequoyah Nuclear Plant

Enclosures

Singerely

cc (Enclosures):

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

> IES5 NER

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) Name TVA - SEQUOYAH NUCLEAR PLANT		RGE ELIMINATION SYSTEM (NPDES) NITORING REPORT (DMR)	MAJOR (SUBR 01)	Form Approved. OMB No. 2040-00
Address P.O. BOX 2000 (INTEROFFICE OPS-5N-SQN)	TN0026450	101 G	F - FINAL	
SODDY - DAISY, TN 37384	PERMIT NUMBER	DISCHARGE NUMBER	DIFFUSER DISCHARGE	
Facility TVA - SEQUOYAH NUCLEAR PLANT Location HAMILTON COUNTY HAMILTON COUNTY	MONI	ORING PERIOD	EFFLUENT	
ATTN: Brad Love	From 12 04 01	YEAR MO DAY To 12 04 30	*** NO DISCHARGE  NOTE: Read instructions before	*** e completing this form.
PARAMETER	QUANTITY OR LOADING	QUALITY OR CO	DNCENTRATION	NO. FREQUENCY

PARAMETER		QUAN	TITY OR LOADING			QUALITY OR CONC	ENTRATION		NO.	FREQUENCY	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	1111
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	33.8	04	0	30 / 30	RCORDR
00010 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	*****	***	*****	*****	Req. Mon. DAILY MAX	DEG. C.		CONTI	CALCTD
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	<del>AA</del>	*****	*****	22.2	04	0	30 / 30	MODELD
00010 Z 0. INSTREAM MONITORING	PERMIT REQUIREMENT	****	******	***	*****	*****	30.5 DAILY MX	DEG. C.		CONTI	CALCTD
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	*****	**	******	*****	3	04	0	30 / 30	CALCTD
00016 1 S EFFLUENT GROSS	PERMIT REQUIREMENT	********	*****	****.	****	*****	3 DAILY MX	DEG. C.	- 1	CONTI	CALCTD
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	1718	03	****	****	*****	**	0	30 / 30	RCORDR
50050 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*******	Reg. Mon. DAILY MAX	MGD	****	*****	****	****	:	CONTI	RCORDR
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	*****	**	****	0.022	0.059	19	0	26 / 30	GRAB
50060 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******		***	*****	0.1 MO AVG	0.1 DAILY MAX	MG/L		FIVE PER WEEK	CALCTD
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	*****	0	62	****	****		**	0	30 / 30	CALCTD
82234 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT		2 DAILY MX	DEG C/HR	RESERVED TO THE PROPERTY OF TH	表表表表表表	*****	****	* 1 * 1	CONTI NUOUS	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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			V		//	TE	LEPHONE		DATE	
John T. Carlin	direction or supervision in accordance with a system designed to assure that qualified personulel 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		M	ľЦ	Site Vice President		* * ***********************************			
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 information,	SIG	NATI	JRE (	OF PRINCIPAL EXECUTIVE	423	843-7001	12	05	09
TYPED OR PRINTED	including the possibility of fine and imprisonment for knowing violations.	\_e	FFIC	CER C	OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY
COMMENTS AND EVEL ANATION OF ANYLYIOLAS	TIONS (D. F									

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

No closed mode operation. Veliger monitoring data is included as an attachment. Spectrus CT1300 treatment began on 4/30/12 (max. calc. conc. was 0.037mg/L--limit 0.050mg/L).

Sample Date	Mean # of ZM/m3	% Settlers	Water Temp. (°C)	Sample Date	Mean# of Asiatic Clams/m3	Water Temp. (*C)	NOTES: % LOCATION SUB LOCATION Gravid Asia Clam	
01/03/2012	14	100	26	01/03/2012	0	26	1-25-545	PKS
01/10/2012	0	0	9	01/10/2011	0	9	RCW	WBE
01/17/2011	0	0	10	01/17/2011	0	10	1-ISV-24-1234	PB
01/24/2012	0	0	13	01/24/2012	0	-13	1-25-545	WDT
01/31/2012	0	. 0	17.6	01/31/2012	0	17.6	1-25-545	CR
02/07/2012	0	0	12	02/07/2012	0	12	1-25-545	BB
02/14/2012	0	0	8.3	02/14/2012	0	8.3	1-24-1234	WE
02/21/2012	0	0	26.5	02/21/2012	0	26.5	1-25-545	CR
02/28/2012	0	0	11.1	02/28/2011	0	11.1	1-ISV-24-1234	WBE
03/06/2012	0	0	11.7	03/06/2012	0	11.7	1-ISV-24-1234	WBE
03/13/2012	0	. 0	13	03/13/2012	0	13	1-ISV-24-1234	WBE
03/20/2012	. 0	0	14.6	03/20/2012	0	14.6	1-ISV-24-1234	WBE
03/27/2012	1623	1.3	17.2	03/27/2012	0	17.2	1-ISV-24-1234	WBE
04/03/2012	229	0	18	04/03/2012	0	18	1-ISV-24-1234	PB
04/10/2012	79	20	22	04/10/2012	0	22	1-ISV-24-1234	PB
04/18/2012	326	5	18.8	04/18/2012	0	18.8	1-ISV-24-1234	MJW

PERMITTEE NAME/ADDRESS (Include Fa Name TVA - SEQUOYAH NUCLEA	Different)	NATION			DNITORING		•		S) MAJOR Form Approved. (SUBR 01) OMB No. 2040-0004					
Address P.O. BOX 2000		<del>-</del>	·	TNO	026450	<del></del>		101	т 1	F - FINAL				
(INTEROFFICE OPS-5N-SQN) SODDY - DAISY, TN 37384		<del></del>	<u></u>		T NUMBER		ISCHAR			BIOMONITORIN	IC EOD OUT	=AII 10	.4	
Facility TVA - SEQUOYAH NUCLEAR P	LANT		L	FERIVI					VIDER		IG FOR OUT	ALL 10	1	
Location HAMILTON COUNTY		<del>-</del> — ,		VEAD		ITORING I				EFFLUENT				
			From	YEAR 12			YEAR		DAY	*** NO DISCH	IARGE	***		
ATTN: Brad Love			FIOIII	12	04 0	1 10	12	04	30	NOTE: Read	instructions be	ore comr	aleting this for	m
PARAMETER		QUAN	TITY OR LO	DADING				QUALI	TY OR CO	NCENTRATION		NO.	FREQUENC	Y SAMPLE TYPE
		AVERAGE	MAXIN	MUM	UNITS	MININ	NUM	A۱	/ERAGE	MAXIMUM	UNITS		ANALYSIS	1
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	****	***	**	Monito Not Re		***	*****	*****	23			
TRP3B 1 0	PERMIT REQUIREMENT	******	****	***	***	43	.2	*1	*****	*****	PERCEI	п	SEMI	COMPOS
EFFLUENT GROSS						MININ							ANNUAL	•
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	****	****	***	**	Monito Not Re		**	*****	******	23			
TRP6C 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	****	***	***	43 MIMII	.2	**	*****	****	PERCE	IT	SEMI ANNUAL	COMPOS
	SAMPLE MEASUREMENT													
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	PERMIT REQUIREMENT				1				Λ	3				
NAME/TITLE PRINCIPAL EXECUTIVE OFF	ICED I Certify under p	enalty of law that this doc	ument and all	attachmon	to word proper	ad under mu			-(/	2011		- I	<u> </u>	
	direction or supe	rvision in accordance wit and evaluate the informat	h a system de	signed to a	ssure that qua	lified personne	1	M	, X		IELE	PHONE		DATE
John T. Carlin	persons who ma	nage the system, or those	e persons dire	ctly respon	sible for gathe	ring the		Sepun	ah Site V	ice President	465	040 ===	.   .	
Sequoyah Site Vice President	and complete. I	information submitted is , am aware that there are s ssibility of fine and imprise	ignificant pena	alties for su	bmitting false		\$IGI	VATURE	OF PRINC	CIPAL EXECUTIVE		843-700		05 09
TYPED OR PRINTED		·					1 /0	FYICER	UR AUTH	ORIZED AGENT	CODE	NUMBER	R YEAR	MO DAY
COMMENTS AND EXPLANATION OF ANY	VIOLATIONS (Refer	ence all attachments h	ere)											<del> </del>
Toxicity was not sampled in April 2012.														
•												•		
EPA Form 3320-1 (REV 3/99) Prev	vious editions may be t	ised	7		,,,								Page 1 of	1

Page 1 of 1

PERMITTEE NAME/ADDRESS (Include Name TVA - SEQUOYAH NUCL		Different)			ARGE ELIMINATION SY	r (DMR)	MAJOR (SUBR 01)			orm Approved MB No. 2040-	
Address P. O. BOX 2000 (INTEROFFICE OPS-5N-SQN SODDY - DAISY, TN 37384				026450 T NUMBER	DISCHAR	103 G	F - FINAL LOW VOL. WASTE	TREATME	NT PO	ND	
Facility TVA - SEQUOYAH NUCLEAR Location HAMILTON COUNTY  ATTN: Brad Love	R PLANT		YEAR   From 12	MONI MO DA' 04 01		MO DAY 04 30	*** NO DISCHARO NOTE: Read instr	·	*** e comp	leting this forn	n.
PARAMETER		QUAN	MAXIMUM	UNITS	MINIMUM	QUALITY OR CO	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
РН	SAMPLE MEASUREMENT	******	*****	**	7	******	8	12	0	15 / 30	GRAB
00400 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	****	**	6 MINIMUM	******	9 MAXIMUM	SU	19.00	THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	****	**	*****	9	10	19	0	2/30	GRAB
00530 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	****	**	****	30 MO AVG	100 DAILY MX	MG/L		TWICE/ MONTH	GRAB
OIL AND GREASE	SAMPLE	******	******	**	******	<6	<6	19	0	2/30	GRAB

TREATMENT PLANT SEE **RCORDR** PERMIT. MGD \*\*\*\*\*\* \*\*\*\*\*\* \*\*\*\*\* 50050 1 0 Req. Mon. Req. Mon REQUIREMENT **PERMIT EFFLUENT GROSS** MO AVG DAILY MX SAMPLE **MEASUREMENT PERMIT** REQUIREMENT

03

**MEASUREMENT** PERMIT REQUIREMENT SAMPLE

\*\*\*\*\*\*

\*\*\*\*\*\*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | 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 John T. Carlin 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, Sequoyah Site Vice President

Sequelyan Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE 423 843-7001 12 05 09 NUMBER MO DAY YEAR CODE

TWICE/

MONTH

30 / 30

0

**GRAB** 

**RCORDR** 

19

MG/L

20

DAILY MX

\*\*\*\*\*\*

15

**MO AVG** 

\*\*\*\*\*

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

**TYPED OR PRINTED** 

00556 1

EFFLUENT GROSS

0

FLOW, IN CONDUIT OR THRU

MEASUREMENT

PERMIT

REQUIREMENT

SAMPLE

MEASUREMENT

SAMPLE

**MEASUREMENT** PERMIT REQUIREMENT

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1.127

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1.268

and complete. I am aware that there are significant penalties for submitting false information,

including the possibility of fine and imprisonment for knowing violations.

PERMITTI	EE NAME/ADDRESS (Include Facility Name/Location if Different)
Name	TVA - SEQUOYAH NUCLEAR PLANT
Address	P.O. BOX 2000
	(INTEROFFICE OP\$-5N-SQN)
	SODDY - DAISY, TN 37384
Facility	TVA - SEQUOYAH NUCLEAR PLANT
Location _	HAMILTON COUNTY

ATTN: Brad Love

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

MONITORING PERIOD

To

TN0026450 PERMIT NUMBER DISCHARGE NUMBER

01

YEAR MO DAY

04

From

12

110 G

DAY

30

YEAR MO

04

12

**MAJOR** (SUBR 01) Form Approved. OMB No. 2040-0004

F - FINAL

**RECYCLED COOLING WATER** 

**EFFLUENT** 

\*\*\* NO DISCHARGE XX

NOTE: Read instructions before completing this form.

PARAMETER	PARAMETER	QUAN	ITITY OR LOADING		QUALITY OR CONCENTRATION					FREQUENCY OF	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	****	*****	. **	*****	*****		04			
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	******	**	*****	*****	REPORT DAILY MX	DEG C		CONTIN	CALCTD
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	****	**	****	****		04			
00010 Z 0 INSTREAM MONITORING	PERMIT REQUIREMENT	******	****	**	*****	****	30.5 DAILY MX	DEG C	13	CONTIN	CALCTD
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	****	**	****	*****		04			
00016 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	*****	**	****	******	5 DAILY MX	DEG C		CONTIN	CALCTD
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	****		03	****	****	*****	**			
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	MGD	******	*****	*****	* **		CONTIN	RCORDR
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	****	**	****			19			
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	******	0.1 MO AVG	0.1 DAILY MX	MG/L		Five per Week	CALCTD
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	*****		04	*****	****	******	** .			
82234 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	2 DAILY MX	DEG C	****	****	******	**		CONTIN UOUS	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT								26		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | I Certify under penalty of law that this document and all attachments were prepared under my John T. Carlin Sequoyah Site Vice President

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.

Sectional Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE 843-7001 423 12 05 09 **AREA** NUMBER YEAR MO DAY CODE

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

No Discharge this Period

TYPED OR PRINTED

NATIO	NAL POLI	UTANT I	DISCHARG	E ELIMI	NATION S	YSTE
	DI	SCHAR	E MONIT	FORING	REPOR	T
				<del>-</del>		
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	PERM	IT NUN	/BFR		ISCHAF	RGF
L						
			MONITO	RING	PERIO	)
	YEAR	MO	DAY		YEAR	M
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		TN PERM YEAR	TN00264 PERMIT NUM YEAR MO	TN0026450 PERMIT NUMBER  MONITO YEAR MO DAY	TN0026450 PERMIT NUMBER  MONITORING YEAR MO DAY	PERMIT NUMBER DISCHAR  MONITORING PERIOR  YEAR MO DAY YEAR

EM (NPDES) (DMR)

> 110 T NUMBER

> > DAY

30

Form Approved. OMB No. 2040-0004

(SUBR 01) F - FINAL

**MAJOR** 

RECYCLED COOLING WATER

**EFFLUENT** 

\*\*\* NO DISCHARGE

NOTE: Read instructions before completing this form.

					NOTE: Read instructions be						
PARAMETER		QUAN	ITITY OR LOADING			QUALITY OR CONC	ENTRATION		NO. EX	FREQUENCY OF	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			***	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										
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	PERMIT REQUIREMENT							7			

	I Certify under penalty of law that this document and all attachments were prepared under my	000		TEL	EPHONE.		DATE	
John T. Carlin	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		Site Vice President	400	040 7004	40	0.5	
Sequoyan 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 information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF	PRINCIPAL EXECUTIVE	423	843-7001	12	05 	09
TYPED OR PRINTED	and any or production of the state of the st	OFFICER OR A	AUTHORIZED AGENT	AREA	NUMBER	YEAR	MO	DA

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

No Discharge this Period

PERMITTEE NAME/ADDRESS (Include Name TVA - SEQUOYAH NUCL	•	f Different)			RGE ELIMINATION SY		MAJOR (SUBR 01)			rm Approved. MB No. 2040-	
Address P.O. BOX 2000 (INTEROFFICE OPS-5N-SQN SODDY - DAISY, TN 37384		···································		026450 T NUMBER	DISCHAR	118 G GE NUMBER	F - FINAL WASTEWATER & ST	TORM WA	TER		
Facility TVA - SEQUOYAH NUCLEAR Location HAMILTON COUNTY  ATTN: Brad Love	PLANT	<del></del>	YEAR	MONIT MO DAY 04 01	TORING PERIOD YEAR TO 12	MO DAY 04 30	EFFLUENT *** NO DISCHARG	SE XX	***		
PARAMETER		QUAN	TITY OR LOADING			QUALITY OR CO	NOTE: Read instru INCENTRATION	ictions before	NO.	FREQUENCY	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	19			
00300 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	*****	***	2 MINIMUM	*****	*****	MG/L		TWICE/	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00530 1 0	PERMIT REQUIREMENT	******	*****	****	*****	******	100	MG/L	5,33	TWICE/	GRAB

SAMPLE FLOW, IN CONDUIT OR THRU 03 **MEASUREMENT** TREATMENT PLANT PERMIT 50050 1 0 MGD \*\*\*\*\* ONCE/ **ESTIMA** Req. Mon. Req. Mon. \*\*\*\*\* \*\*\*\*\*\* REQUIREMENT **EFFLUENT GROSS** DAILY MX **BATCH** MO AVG SAMPLE MEASUREMENT

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PERMIT REQUIREMENT SAMPLE

SAMPLE

MEASUREMENT

**PERMIT** 

**PERMIT** REQUIREMENT SAMPLE MEASUREMENT

REQUIREMENT:

**MEASUREMENT** PERMIT REQUIREMENT

\*\*\*\*\*\*

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | 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 personne 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.

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**TELEPHONE** DATE egeyah Site Vice President 423 843-7001 12 05 09 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT NUMBER YEAR DAY MO CODE

DAILY MX

1 1

**DAILY MX** 

25

ML/L

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.

John T. Carlin

Sequoyah Site Vice President

TYPED OR PRINTED

**EFFLUENT GROSS** 

**EFFLUENT GROSS** 

00545 1

SOLIDS, SETTLEABLE

0

WEEK

ONCE/

MONTH

**GRAB**