



**NUCLEAR FUEL SERVICES, INC.**  
a subsidiary of The Babcock & Wilcox Company

■ 1205 banner hill road ■ erwin, tn 37650 ■ phone 423.743.9141  
■ www.nuclearfuelservices.com

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

21G-12-0201  
GOV-05-01-01  
ACF-12-0264

October 10, 2012

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

References: 1) Nuclear Fuel Services, Inc. (NFS) NPDES Permit No. TN0002038  
2) Letter from Stephanie Fisher to permittee, received on 10-27-08

Dear Mr. Cromer:


As required by Part I, D.1 of NPDES Permit #TN0002038, we hereby submit the original and a copy of the Monthly Discharge Monitoring Report (DMR), EPA Form 3320-1, for September 2012 as Attachment I.

Laboratory analyses for required permit parameters were performed on eleven (11) Waste Water Treatment Facility (WWTF) batches discharged during this reporting period. All values were indicated by these analyses to be within their respective permit conditions.

If you or your staff have any questions, require additional information, or wish to discuss this, please contact me or Ms. Joyce Griffith, Environmental Scientist, at (423) 735-5584. Please reference our unique document identification number (21G-12-0201) in any correspondence concerning this letter.

Sincerely,

**NUCLEAR FUEL SERVICES, INC.**

  
B. Marie Moore, Manager  
Environmental Protection & Industrial Safety

CAH/trm  
Attachment (1): September 2012 DMR

B.M. Moore to Mr. Patrick Cromer  
October 10, 2012

21G-12-0201  
GOV-05-01-01  
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cc: U.S. Nuclear Regulatory Commission  
Region II  
245 Peachtree Center Ave., NE  
Suite 1200  
Atlanta, GA 30303-1257

Mr. Jeff Horton, Manager  
Johnson City Basin  
TN Division of Water Pollution Control  
2305 Silverdale Road  
Johnson City, TN 37601-2162

B.M. Moore to Mr. Patrick Cromer  
October 10, 2012

21G-12-0201  
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Attachment I

September 2012 DMR

**NAME** Nuclear Fuel Services  
**ADDRESS** 1205 Banner Hill Road  
 Erwin, TN 37650  
**FACILITY** Nuclear Fuel Services  
**LOCATION** 1205 Banner Hill Road  
 Erwin, TN 37650  
**Attn:** B. Marie Moore, EP&S MGR

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)**  
**DISCHARGE MONITORING REPORT (DMR)**  
 TN0002038  
 PERMIT NUMBER  
 001-G  
 DISCHARGE NUMBER  
**MONITORING PERIOD**  
 MM/DD/YYYY TO MM/DD/YYYY  
 9/1/2012 TO 9/30/2012

**DMR Mailing ZIP CODE:** 37650  
**MAJOR (SUBR 06)**  
**TREATED PROCESS WASTEWATER**  
 External Outfall

No Discharge

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION		UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE				
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	*****	*****	*****	*****	mg/L	0	11	GRAB
00340 1 0 EFFLUENT GROSS	*****	*****	*****	*****	mg/L		Monthly	GRAB
pH	*****	*****	6.60	*****	mg/L	0	11	GRAB
00400 1 0 EFFLUENT GROSS	*****	*****	6	*****	SU		Once Per Batch	GRAB
SOLIDS, TOTAL SUSPENDED	*****	*****	MINIMUM	*****	mg/L	0	11	GRAB
00530 1 0 EFFLUENT GROSS	*****	*****	*****	11.09	mg/L	0	11	GRAB
SOLIDS, SETTLEABLE	*****	*****	*****	30	mg/L		Once Per Batch	GRAB
00545 1 0 EFFLUENT GROSS	*****	*****	*****	MO AVG	mL/L	0	11	GRAB
NITROGEN, AMMONIA TOTAL (as N)	*****	*****	*****	*****	mL/L		Once Per Batch	GRAB
00610 1 0 EFFLUENT GROSS	*****	*****	*****	16.64	mg/L	0	11	GRAB
NITRITE PLUS NITRATE TOTAL 1 DET. (as N)	*****	*****	*****	20	mg/L		Once Per Batch	GRAB
00630 1 0 EFFLUENT GROSS	*****	*****	*****	MO AVG	*****	0	11	GRAB
FLUORIDE, TOTAL (as F)	*****	*****	*****	*****	*****		Once Per Batch	GRAB
00951 1 0 EFFLUENT GROSS	*****	*****	*****	BDL<	mg/L	0	11	GRAB
	*****	*****	*****	15	mg/L		Once Per Batch	GRAB

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.

B. Marie Moore, Manager  
 Environmental Protection & Industrial Safety

TYPED OR PRINTED NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER  
 OFFICER OR AUTHORIZED AGENT  
 TELEPHONE NUMBER  
 423 743-9141  
 DATE  
 10/10/2012  
 AREA CODE NUMBER  
 MM/DD/YYYY

**COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)**  
 THE MERCURY (Hg) LMT APPLIES ONLY IF DISCHARGES CONTAINING Hg OCCUR 4+CONSECUTIVE DAYS/WK DURING THE MON. PERIOD. OTHERWISE, ONLY THE DAILY MAX LMT APPLIES. IF ANY TEST RESULT FOR Hg IS <THE MIN QUANT. LEVEL (0.0002 MG/L), THEN ZERO MAY BE USED FOR DMR CALCS AND REPORT. RQRMENTS.

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
**NAME** Nuclear Fuel Services  
**ADDRESS** 1205 Banner Hill Road  
 Erwin, TN 37650  
**FACILITY** Nuclear Fuel Services  
**LOCATION** 1205 Banner Hill Road  
 Erwin, TN 37650  
 Attn: B. Marie Moore, EP&S MGR

DMR Mailing ZIP CODE: 37650  
 MAJOR (SUBR 06)  
 TREATED PROCESS WASTEWATER  
 External Outfall

001-G  
 DISCHARGE NUMBER

PERMIT NUMBER  
 TN0002038


MONITORING PERIOD  
 FROM 9/1/2012 TO 9/30/2012

No Discharge

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION		UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS				
CADMIUM, TOTAL (as Cd)	*****	*****	*****	*****	mg/L	0	01 / 30	GRAB
01027 1 0 EFFLUENT GROSS	*****	*****	*****	*****	mg/L		Monthly	GRAB
COPPER, TOTAL (as Cu)	*****	*****	*****	*****	mg/L	0	01 / 30	GRAB
01042 1 0 EFFLUENT GROSS	*****	*****	*****	*****	mg/L		Monthly	GRAB
LEAD, TOTAL (as Pb)	*****	*****	*****	*****	mg/L	0	01 / 30	GRAB
01051 1 0 EFFLUENT GROSS	*****	*****	*****	*****	mg/L		Monthly	GRAB
SILVER, TOTAL (as Ag)	*****	*****	*****	*****	mg/L	0	01 / 30	GRAB
01077 1 0 EFFLUENT GROSS	*****	*****	*****	*****	mg/L		Monthly	GRAB
URANIUM, NATURAL, TOTAL	*****	*****	*****	*****	mg/L	0	11 / 11	GRAB
22708 1 0 EFFLUENT GROSS	*****	*****	*****	*****	mg/L		Once Per Batch	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	0.013927	MGD	*****	*****	*****	0	11 / 11	ESTIMA
50050 1 0 EFFLUENT GROSS	Req. Mon. MO AVG	MGD	*****	*****	*****		Once Per Batch	ESTIMA
CHLORINE, TOTAL RESIDUAL	*****	*****	*****	*****	mg/L	0	0 / 0	GRAB
50060 1 0 EFFLUENT GROSS	*****	*****	*****	*****	mg/L		Once Per Batch	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 B. Marie Moore, Manager  
 Environmental Protection & Industrial Safety

TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  


TELEPHONE  
 423 743-9141

DATE  
 10/10/2012

COMMENTS AND EXPLANATION OF ANY VIOLATION: (Reference all attachments here)  
 THE MERCURY (Hg) LMT APPLIES ONLY IF DISCHARGES CONTAINING Hg OCCUR 4+ CONSECUTIVE DAYS/WK DURING THE MON. PERIOD. OTHERWISE, ONLY THE DAILY MAX LMT APPLIES. IF ANY TEST RESULTS FOR Hg IS <THE MIN. QUANT. LEVEL (0.0002 MGD/L), THEN ZERO MAY BE USED FOR DMR CALCS AND REPORT. RQRMNTS.

EPA Form 3320-1 (Rev. 01/06) Previous editions may be used.

PAGE 2 OF 3

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

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 External Outfall

**MONITORING PERIOD**  
 FROM 9/1/2012 TO 9/30/2012

No Discharge

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS			
MERCURY, TOTAL (as Hg)	*****	*****	*****	mg/L	0	11	GRAB
71900 1 0	*****	*****	.00037 MO AVG	mg/L	0	Once Per Batch	GRAB
EFFLUENT GROSS	*****	*****	.05 DAILY MX		0		GRAB

<b>NAME/TITLE PRINCIPAL EXECUTIVE OFFICER</b> B. Marie Moore, Manager Environmental Protection & Industrial Safety	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 ensure 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.		TELEPHONE DATE
	TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	AREA CODE NUMBER 423 743-9141 10/10/2012 MM/DD/YYYY

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

THE MERCURY (Hg) LMT APPLIES ONLY IF DISCHARGES CONTAINING Hg OCCUR 4+ CONSECUTIVE DAYS/MK DURING THE MON. PERIOD. OTHERWISE, ONLY THE DAILY MAX LMT APPLIES. IF ANY TEST RESULT FOR Hg IS < THE MIN. QUANT. LEVEL (0.0002 MG/L), THEN ZERO MAY BE USED FOR DMR CALCS AND REPORT. RQRMENTS. SEPTEMBER 2012 DID NOT HAVE MORE THAN 4 CONSECUTIVE DAYS OF DISCHARGE.