



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

December 14, 2012

Ms. Christina Morgan  
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

Dear Ms. Morgan:

TENNESSEE VALLEY AUTHORITY (TVA) - SEQUOYAH NUCLEAR PLANT (SQN) - NPDES  
PERMIT NO. TN0026450 - DISCHARGE MONITORING REPORT (DMR) FOR NOVEMBER 2012

Enclosed is the November 2012 Discharge Monitoring Report for Sequoyah Nuclear Plant. The turbine building sump (TBS) discharged directly to the yard drainage pond during the reporting period and was monitored in accordance with the narrative condition found in Part 1.A.2. of the subject permit.

Also enclosed are two attachments containing information regarding a collection system overflow that occurred during the reporting period, TBS monitoring data, and an update for previously reported collection system overflows. At no time has there been any observed threat to public drinking supplies, to human health, or the environment.

If you have any questions or need additional information, please contact Brad Love by email at [bmlove@tva.gov](mailto:bmlove@tva.gov) or by phone at (423) 843-6714.

*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,

John T. Carlin  
Site Vice President  
Sequoyah Nuclear Plant

Enclosures

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

IEZS  
NRR

**TVA Sequoyah Nuclear Plant  
NPDES Permit No. TN0026450  
Attachment 1**

**Description of the Event and Determination of Cause**

On 11/25/2012 at 22:13 EDT the Sequoyah (SQN) Shift Manager was notified of a low-flow sewage overflow coming from a manhole located in the roadway between the Plant Office Building, Multi-Purpose Building, and Security Building. The shift manager initiated the SQN Spill Plan and dispatched personnel to investigate. An intermittent stream of sewage was discovered flowing out of the manhole and running approximately 20 feet across the road before it reached a yard drain. On 11/25/2012 at 22:30 EDT the sewage overflow was stopped from entering the yard drain. All remaining sewage residue in the road was neutralized with lime. The yard drain flows to the SQN Yard Drainage Pond, which discharges to the Diffuser Pond. The Diffuser Pond discharges through Outfall 101 to the Tennessee River. At no time was there any observed threat to the public drinking supplies, to human health, or the environment.

The total quantity of sewage that overflowed into a yard drain was estimated to be less than 5 gallons. The overflow was caused by a mass of foreign material becoming entangled around the ejector pump float switch. The ejector pump float switch became locked in the high level position and the pump continued to run. The ejector pump eventually tripped due to overheating which led to an associated trip of the high level alarm.

**Period of Discharge**

The shift manager was notified of the overflow on 11/25/2012 at 22:13 EDT. The sewage overflow was entering the yard drain as personnel responding to the spill arrived. The sewage was stopped from entering the yard drain on 11/25/2012 at 22:30 EDT. The estimated time of discharge was approximately 17 minutes.

**Steps Being Taken to Reduce, Eliminate, and Prevent Recurrence**

This incident was entered into the TVA Corrective Action Program. Sequoyah continues daily monitoring of sewage ejector pump locations to ensure control power has not been isolated and has added visual inspections of associated manholes to verify the absence of foreign material which may cause ejector pump issues.

**TVA Sequoyah Nuclear Plant  
NPDES Permit No. TN0026450  
Attachment 2**

**Turbine Building Sump Monitoring Data**

The turbine building sump was discharged directly to the yard drainage pond from 11/10/2012 to 11/15/2012. During this period, the turbine building sump was monitored in accordance with the narrative condition found in Part 1.A.2 of NPDES Permit TN0026450.

Parameter	Daily Minimum	Monthly Average	Daily Maximum	No. of Samples
Flow	-	0.480 MGD	1.150 MDG	6
pH	8 s.u.	-	8 s.u.	5
O&G	-	< 4 mg/L	< 6 mg/L	5
TSS	-	4 mg/L	7 mg/L	5

**Update on Previously Reported Sewage Collection System Overflows**

SQN is herein providing an update regarding sewage collection system overflow events previously reported to the Division. Each event was entered into the TVA Corrective Action Program, and an investigation was initiated to determine the cause(s). Throughout the investigation and the duration of the Steam Generator Replacement outage, Sequoyah has implemented shiftly monitoring of onsite sewage ejectors as an added precaution.

SQN determined the sewage collection system overflows had two apparent causes. The investigation indicated there was no consistent method to inform secondary and tertiary electrical feeds when switching circuit breakers of primary electrical systems. The investigation also indicated there are potential opportunities to improve the inspection program. As a result, TVA will elicit the involvement of a Grade I collection system operator to review the existing system and provide recommendations for necessary upgrades to the material condition and inspection program. The review will include at a minimum an evaluation of current alarm system design and inspection program scope and frequency. In addition, measures will be taken by site personnel to improve response awareness and ensure prompt and appropriate actions continue to be taken.

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **P.O. BOX 2000**  
**(INTEROFFICE OPS-5N-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

DIFFUSER DISCHARGE

EFFLUENT

Form Approved.  
 OMB No. 2040-0004

**TN0026450** **101 G**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

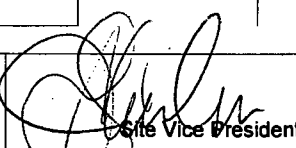
MONITORING PERIOD  
 From **12 11 01** To **12 11 30**

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Brad Love

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	29.6	04	0	30 / 30	RCORDR
00010 1 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	Req. Mon. DAILY MAX	DEG. C.		CONTI NUOUS	CALCTD
EFFLUENT GROSS											
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	17.4	04	0	30 / 30	MODEL D
00010 Z 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.5 DAILY MX	DEG. C.		CONTI NUOUS	CALCTD
INSTREAM MONITORING											
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	2	04	0	30 / 30	CALCTD
00016 1 1	PERMIT REQUIREMENT	*****	*****	****	*****	*****	5 DAILY MX	DEG. C.		CONTI NUOUS	CALCTD
EFFLUENT GROSS											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	983	03	*****	*****	*****	**	0	30 / 30	RCORDR
50050 1 0	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MAX	MGD	*****	*****	*****	****		CONTI NUOUS	RCORDR
EFFLUENT GROSS											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****	0.012	0.020	19	0	14 / 30	GRAB
50060 1 0	PERMIT REQUIREMENT	*****	*****	****	*****	0.1 MO AVG	0.1 DAILY MAX	MG/L		FIVE PER WEEK	CALCTD
EFFLUENT GROSS											
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	*****	0	62	*****	*****		**	0	30 / 30	CALCTD
82234 1 0	PERMIT REQUIREMENT	*****	2 DAILY MX	DEG C/HR	*****	*****	*****	****		CONTI NUOUS	CALCTD
EFFLUENT GROSS											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  John T. Carlin  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.	 Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			423	843-7001	12	12	14
			AREA CODE	NUMBER	YEAR	MO	DAY

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: 1. Floguard MS6236 (max. calc conc. was 0.103mg/L--limit 0.2mg/L), 2. Biodetergent 73551 (max. calc. conc. was 0.051mg/L--limit 2.0mg/L)

Sample Date	Mean # of ZM/m3	% Settlers	Water Temp. (°C)	Sample Date	Mean# of Asiatic Clams/m3	Water Temp. (°C)	LOCATION	NOTES: % Gravid Asiatic Clam	COLLECTED BY
01/03/2012	14	100	26	01/03/2012	0	26			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			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
May 2012									No Samples Collected
June 2012									No Samples Collected
July 2012									No Samples Collected
August 2012									No Samples Collected
September 2012									No Samples Collected
10/23/2012	394	8	17	10/23/2012	82	17	1-ISV-24-1234		WAW
10/30/2012	34	50	17	10/30/2012	17	17	1-ISV-24-1234		WAW
11/06/2012	0	0	17	11/06/2012	0	17	1-ISV-24-1234		WAW
11/13/2012	0	0	15	11/13/2012	0	15	1-ISV-24-1234		WAW
11/20/2012	0	0	13	11/20/2012	0	13	1-ISV-24-1234		WAW
11/28/2012	0	0	12	11/28/2012	0	12	1-ISV-24-1234		WAW
12/04/2012	0	0	12	12/04/2012	0	12	1-ISV-24-1234		WAW

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **P.O. BOX 2000**  
**(INTEROFFICE OPS-5N-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)

Form Approved.  
 OMB No. 2040-0004

**TN0026450** **101 T**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

F - FINAL  
 BIOMONITORING FOR OUTFALL 101  
 EFFLUENT

MONITORING PERIOD  

YEAR	MO	DAY	YEAR	MO	DAY
12	11	01	12	11	30

From

To

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

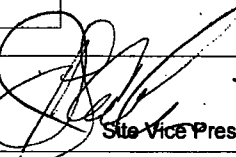
PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****	**	Monitoring Not Required	*****	*****	23			
TRP3B 1 0 EFFLUENT GROSS	PERMIT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

John T. Carlin  
 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.

  
 Site Vice President

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

423 843-7001

AREA CODE

NUMBER

DATE

12 12 14

YEAR MO DAY

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

Toxicity was not sampled in November 2012.

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

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 Address **P.O. BOX 2000**  
 (INTEROFFICE OPS-5N-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)

Form Approved.  
 OMB No. 2040-0004

**TN0026450** **103 G**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

F - FINAL  
 LOW VOL. WASTE TREATMENT POND  
 EFFLUENT

MONITORING PERIOD  

YEAR	MO	DAY	YEAR	MO	DAY
12	11	01	12	11	30


From To

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Brad Love

PARAMETER		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	13 / 30	GRAB
00400 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	**	6 MINIMUM	*****	9 MAXIMUM	SU		THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	8	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 MEASUREMENT	*****	*****	**	*****	<6	<6	19	0	2 / 30	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	1.254	1.685	03	*****	*****	*****	**	0	30 / 30	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  John T. Carlin  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.	 Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			423	843-7001	12	12	14
			AREA CODE	NUMBER	YEAR	MO	DAY

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

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **P.O. BOX 2000**  
**(INTEROFFICE OPS-5N-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)

Form Approved.  
 OMB No. 2040-0004

**TN0026450** **110 G**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

F - FINAL  
 RECYCLED COOLING WATER  
 EFFLUENT

MONITORING PERIOD  
 From **12 11 01** To **12 11 30**

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Brad Love

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

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John T. Carlin		423	843-7001	12	12	14		
Site Vice President								
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



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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **P.O. BOX 2000**  
**(INTEROFFICE OPS-5N-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)

Form Approved  
 OMB No. 2040-0004

**TN0026450** **110 T**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

F - FINAL  
 RECYCLED COOLING WATER  
 EFFLUENT

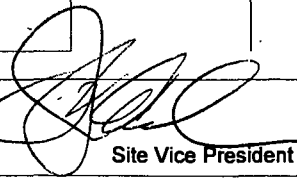
MONITORING PERIOD  
 From **12 11 01** To **12 11 30**

\*\*\* NO DISCHARGE **XX** \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Brad Love

PARAMETER		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										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  John T. Carlin  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.	 Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
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			AREA CODE	NUMBER	YEAR	MO	DAY

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

No Discharge this Period

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **P.O. BOX 2000**  
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**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)

Form Approved.  
OMB No. 2040-0004

TN0026450

118 G

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
12	11	01	12	11	30

From

To

F - FINAL

WASTEWATER & STORM WATER

EFFLUENT

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Brad Love

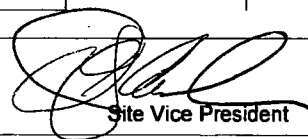
PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO) 00300 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	19			
	PERMIT REQUIREMENT	*****	*****	***	2 MINIMUM	*****	*****	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

John T. Carlin  
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.

  
Site Vice President

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

423 843-7001

AREA CODE

NUMBER

DATE

12 12 14

YEAR MO DAY

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.