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ACCESSION NBR: 9106270150 DOC. DATE: 91/05/31 NOTARIZED: NO DOCKET #
 FACIL: 50-387 Susquehanna Steam Electric Station, Unit 1, Pennsylva 05000387
 50-388 Susquehanna Steam Electric Station, Unit 2, Pennsylva 05000388

AUTH. NAME AUTHOR AFFILIATION
 KEISER, H.W. Pennsylvania Power & Light Co.
 FIELDS, J.S. Pennsylvania Power & Light Co.
 RECIPIENT NAME RECIPIENT AFFILIATION

WILKES, J.J. Pennsylvania, Commonwealth of

SUBJECT: "NPDES Discharge Monitoring Rept for May 1991." W/910617
 ltr.

DISTRIBUTION CODE: IE25D COPIES RECEIVED: LTR 1 ENCL 1 SIZE: 12
 TITLE: Environmental Monitoring Rept (per Tech Specs)

NOTES: LPDR 1 cy Transcripts. 05000387 A
 LPDR 1 cy Transcripts. 05000388 D

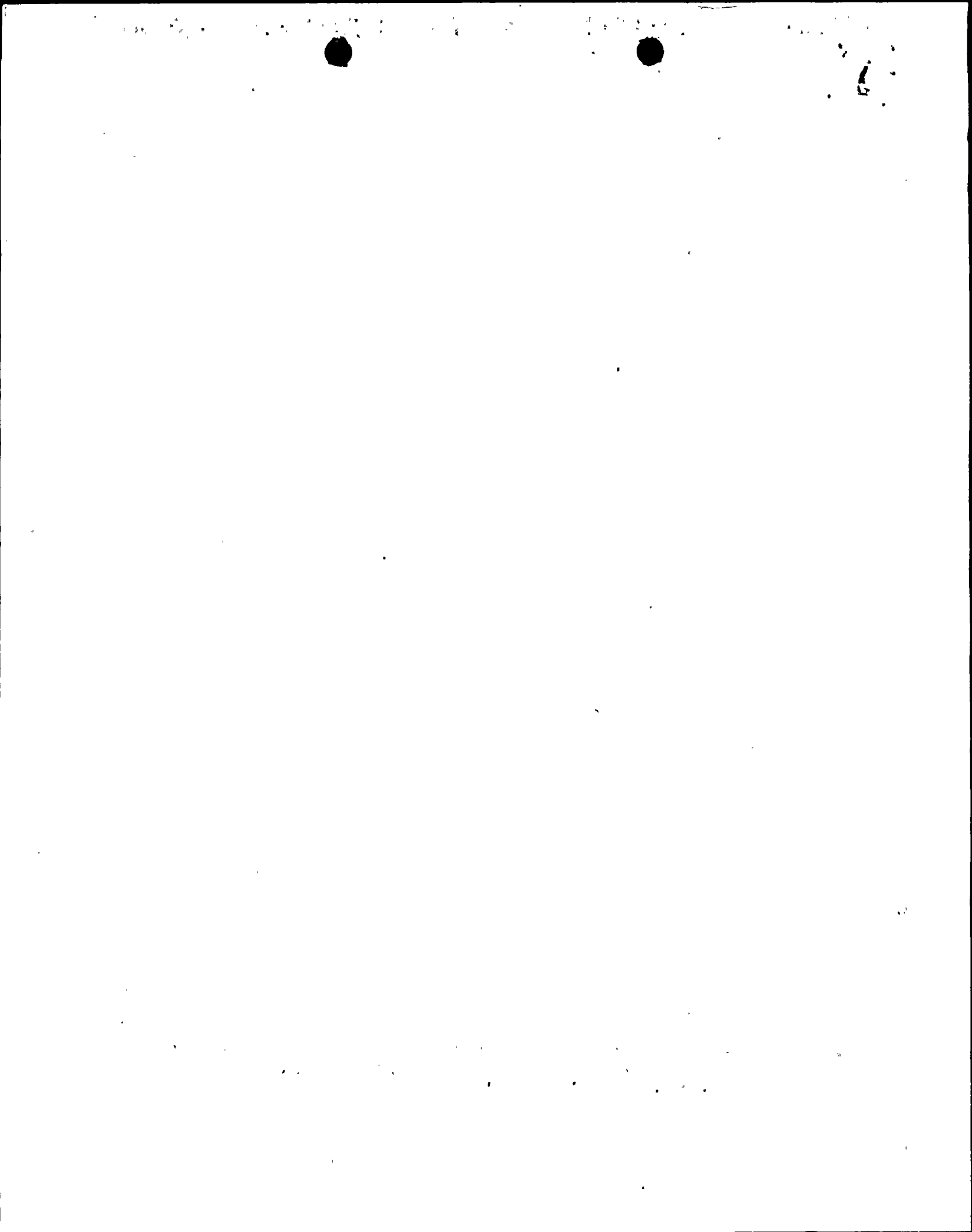
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	<u>REG FILE</u>	01	1	1	RES. RADDATZ, C.		1	1
	RGNI	DRSS/RPB	1	1	RGNI FILE 02		1	1
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NOTES:			2	2				

NOTE TO ALL "RIDS" RECIPIENTS:

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Pennsylvania Power & Light Company

Two North Ninth Street • Allentown, PA 18101 • 215 / 770-5151

June 17, 1991

Mr. John J. Wilkes, Jr.
Water Quality Regional Manager
Bureau of Water Quality Management
Pennsylvania Department of Environmental Resources
90 East Union Street, 2nd Floor
Wilkes-Barre, PA 18701-3296

SUSQUEHANNA STEAM ELECTRIC STATION
DISCHARGE MONITORING REPORT - MAY 1991
NPDES PERMIT NO. PA 0047325
CCN 741326 FILE R9-8A
PLE-14385

Dear Mr. Wilkes:

Pursuant to Part A, 3.b.(1) of NPDES Permit No. PA 0047325, enclosed is the Susquehanna Steam Electric Station discharge monitoring report for May 1991. Also enclosed is Pennsylvania Department of Environmental Resources' Monthly Facility Report Form (01-112).

There were no noncompliances this month.

If you have any questions, please contact me at (215) 774-7889.

Respectfully yours,

Jerome S. Fields
Senior Environmental Scientist - Nuclear

jsf/ltk2294o(26)

Enclosures

cc: EPA Region III
NRC Document Control Desk
NRC Region I
Mr. J. J. Raleigh, NRC Project Manager
S. J. Lehman, PaDER

9106270150 910531
PDR ADOCK 05000387
R PDR

Handwritten initials/signature



01-112

PA DEPARTMENT OF ENVIRONMENTAL RESOURCES

Month May

MONTHLY FACILITY REPORT

Date Prepared 6/19/91

Facility Name Susquehanna Steam Electric Station PWS ID NO. 2400994
 Facility Address P.O. Box 467
Berwick, PA 18603 NPDES Permit No. PA 0047325
 Municipality Salem Township Incinerator Permit Number(s) N/A
 County Luzerne Telephone Number (215) 774-7889

Person Completing Form Jerome S. Fields
 Signature *Jerome S. Fields* (Print Name)

Title Sr. Environmental Scientist

- 1. Total Hours Incinerator Operated N/A
- 2. Type of Fuel N/A
- 3. Total Fuel Usage N/A
- 4. Supplier of Fuel N/A
- 5. Estimated Amount of Sludge Incinerated N/A

- 6. Incinerator Ash Disposal N/A
- 7. Sludge Disposal Water Treatment
 - (a) How Much (Tons) 63.75
 - (b) Where Waste Conversion*
 - (c) When (Last Occurrence) 5/30/91
 - (d) Hauler Keystone Block
 - (e) Receipts: Yes No

- 8. Other Wastes (Grits, Barscreening, etc.)
 - (a) How Much (Tons) 21.25
 - (b) Where Mowery Farm
 - (c) When (Last Occurrence) 5/15/91
 - (d) Hauler Biebers Contracting Company
 - (e) Receipts: Yes No X

*Hatfield, PA
 **Route 54, Montgomery
 Lycoming County
 Permit #603001

- 9. Septic Tank Waste Accepted: Yes No
- 10. If yes:
 - (a) Volume
 - (b) Hauler(s) Percent (%) Hauled

- 11. Analysis Performed to ensure tank waste contains no industrial waste
 - (a) Yes No
 - (b) If yes, frequency

12. Additional Comments: 2,000 gallons of septic tank waste taken offsite and treated
at Hazleton Sewage Treatment Plant.

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME PENNSYLVANIA P & L - SUSQUHNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325
 PERMIT NUMBER

071 A
 DISCHARGE NUMBER

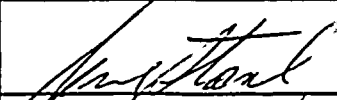
MAJOR (SUBR 02)
 F - FINAL
 COOLING TOWER BLOWDOWN

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAM, VICE PRESIDENT

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	05	01		91	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****	()	8.35	*****	8.75	(12)	0	31/31 Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY GRAB
ZINC, TOTAL (AS ZN)		*****	*****	()	*****	*****	0.62	(19)	0	1/7 Comp 8
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0 DLY MAX	MG/L		WEEKLY COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		10.00	17.99	(03)	*****	*****	*****	()	*	31/31 record
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	MGD	*****	*****	*****	****		DAILY RECORDR
CHLORINE, FREE AVAILABLE		*****	*****	()	*****	*****	20.05	(19)	0	31/31 Grab
50064 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	.20 DLY MAX	MG/L		SEE GRAB PERMIT
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>H. W. Keiser, Sr. V. P.</u> <u>Nuclear Operations</u> TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 3 years.)	TELEPHONE <u>717 5423220</u>	DATE		
			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	AREA CODE	NUMBER

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

FREE AVAILABLE CHLORINE SHALL BE TAKEN DAILY BY GRAB DURING CHLORINATION.

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

NAME PENNSYLVANIA P & L - SUSQUHNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325
 PERMIT NUMBER

072 A
 DISCHARGE NUMBER


MAJOR (SUBR 02)
 F - FINAL
 SERV AND ADMIN BUILDING SUMP

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	05	01		91	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAM, VICE PRESIDENT

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
PH	SAMPLE MEASUREMENT	*****	*****	()	7.45	*****	7.45	(12)	0	1/31	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0				DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	4.6	4.6	(19)	0	1/31	Gr
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0				ONCE/ GRAB MONTHL.
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****	4.4	4.4	(19)	0	1/31	Grab
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0				ONCE/ GRAB MONTH
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0105	0.0105	(03)	*****	*****	*****	()	*	1/31	Est.
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****			DAILY ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>H.W. Keiser, Sr. V. P.</u> <u>Nuclear Operations</u>	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE	DATE			
			717 5423220	91 06 12			
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 FLOW AND PH SHALL BE MEASURED DAILY WHEN DISCHARGING.

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

NAME PENNSYLVANIA P & L - SUSQUEHNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325
 PERMIT NUMBER

073 A
 DISCHARGE NUMBER

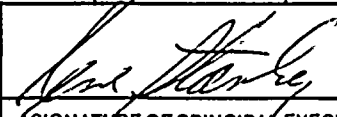
MAJOR (SUBR 02)
 F - FINAL
 #1 TURBINE BLDG WASTE SUMP.

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAM, VICE PRESIDENT

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
91	05	01	91	05	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***
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PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE (54-55)	MAXIMUM (56-57)	UNITS (58)	MINIMUM (54-55)	AVERAGE (56-57)	MAXIMUM (58)				UNITS (59-61)
PH		*****	*****	()	7.85	*****	7.85	(12)	0	1/31	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	6.0	*****	9.0				DAILY GRAB
	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM		MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED		*****	*****	()	*****	1.1	1.1	(19)	0	1/31	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	30.0	100.0				ONCE/ GRAB
	PERMIT REQUIREMENT	*****	*****	*****		MNTH AVG	DLY MAX	HG/L			MONTH
OIL AND GREASE		*****	*****	()	*****	2.4	2.4	(19)	0	1/31	Grab
FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****	*****	*****	15.0	20.0				ONCE/ GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****		MNTH AVG	DLY MAX	HG/L			MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.0087	0.0087	(03)	*****	*****	*****	()	*	1/31	Est.
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	REPORT	REPORT	HGD	*****	*****	*****	*****			DAILY ESTIMA
	PERMIT REQUIREMENT	MNTH AVG	DLY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>H.W. Keiser, Sr. V.P.</u> <u>Nuclear Operations</u> TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE 717 542 3220	DATE 91 06 12
			AREA CODE NUMBER	YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 FLOW AND PH SHALL BE MEASURED DAILY WHEN DISCHARGING.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME PENNSYLVANIA P & L - SUSQUHUNNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325 074 A
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 02)
 P - FINAL
 #2 TURBINE BLDG WASTE SUMP

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAM, VICE PRESIDENT

MONITORING PERIOD							
FROM	YEAR	MO.	DAY	TO	YEAR	MO.	DAY
	91	05	01		91	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***
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PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	()	7.50	*****	7.90	(12)	0	4/31 Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0	*****	9.0			DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	1.2	1.2	(19)	0	1/31 Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30.0	100.0			ONCE/ GRAB MONTH
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****	0.0	0.0	(19)	0	1/31 Grab
FREON EXTH-GRAB METH	PERMIT REQUIREMENT	*****	*****	***	*****	15.0	20.0			ONCE/ GRAB MONTH
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0116	0.0174	(03)	*****	*****	*****	()	*	3/31 Est.
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	***		DAILY ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER H. W. Keiser, Sr. V.P. Nuclear Operations TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE 717 5423220	DATE 91 06 12
			AREA CODE NUMBER	YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 FLOW AND PH SHALL BE MEASURED DAILY WHEN DISCHARGING.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME PENNSYLVANIA P & L - SUSQUHUNNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325 PERMIT NUMBER
079 A DISCHARGE NUMBER


MAJOR (SUBR 02)
 F - FINAL
 SEWAGE TREATMENT EFFLUENT

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAM, VICE PRESIDENT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
91	05	01		91	05	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	()	7.4	*****	7.7	(12)	0 31/31	Grab
00400 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	1.9	*****	(26)	*****	8.5	*****	(19)	* 1/31	Com 8
00530 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	20.00 Mnth Avg	*****	LBS/DY	*****	30.00 Mnth Avg	*****	MG/L		ONCE/ COMP-8 MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.018	0.0277	(03)	*****	*****	*****	()	* 31/31	FLOW IND
50050 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	0.08 Mnth Avg	REPORT DLX MAX	MGD	*****	*****	*****	****		DAILY FLOIND
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	()	0.20	0.31	0.50	(19)	* 31/31	Grab
50064 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	REPORT ARI MEAN	REPORT MAXIMUM	MG/L		DAILY GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	()	*****	< 3	*****	(13)	* 1/31	Grab
74055 A 1 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	*****	200 30DA GEO	*****	/ 100ML		ONCE/ GRAB MONTH
BOD, CARBONACEOUS 05 DAY, 20C	SAMPLE MEASUREMENT	2.1	*****	(26)	*****	9.4	*****	(19)	* 1/31	Com 8
80082 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	16.70 Mnth Avg	*****	LBS/DY	*****	25.0 Mnth Avg	*****	MG/L		ONCE/ COMP-8 MONTH
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>H. W. Keiser, Sr. V.P.</u> <u>Nuclear Operations</u> TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE		DATE		
			717 5423220	91	06	12	

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

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

NAME PENNSYLVANIA P & L - SUSQUHUNNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325
 PERMIT NUMBER

171 A
 DISCHARGE NUMBER

MAJOR
 (SUBR 02)
 F - FINAL
 RADWASTE TREATMENT EFFLUENT

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAM, VICE PRESIDENT

MONITORING PERIOD
 FROM YEAR 91 MO 05 DAY 01 TO YEAR 91 MO 05 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE		*****	*****	()	*****	0.1	0.1	(19)	0	1/31	Grab
		*****	*****	*** ****	*****	30.0 Mnth Avg	100.0 Dly Max	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE		0.025	0.076	(03)	*****	*****	*****	()	*	18/31	ES
		REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		DAILY ESTIMA	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H. W. Keiser, Sr. V.P.
Nuclear Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

[Signature]
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
717 5423220
 AREA CODE NUMBER
 DATE
91 06 12
 YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING.

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

NAME PENNSYLVANIA P & L - SUSQUHUNNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325
 PERMIT NUMBER

271 A
 DISCHARGE NUMBER

MAJOR (SUBR 02)
 F - FINAL
 WASTE FILTER BYPASS

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAN, VICE PRESIDENT

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	05	01		91	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53) (54-61)			QUALITY OR CONCENTRATION (4 Card Only) (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	<input checked="" type="checkbox"/>	*****	*****	()	*****			(19)			
EFFLUENT GROSS VALUE	<input checked="" type="checkbox"/>	*****	*****	****	*****	30.0	100.0	MG/L		ONCE/MONTH	GRAB
OIL AND GREASE PREON EXTR-GRAV METH 00556 1 0 0	<input checked="" type="checkbox"/>	*****	*****	()	*****			(19)			
EFFLUENT GROSS VALUE	<input checked="" type="checkbox"/>	*****	*****	****	*****	15.0	20.0	MG/L		ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	<input checked="" type="checkbox"/>			(03)	*****	*****	*****	()			
EFFLUENT GROSS VALUE	<input checked="" type="checkbox"/>	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		DAILY	FLO/IND
	<input checked="" type="checkbox"/>										
	<input checked="" type="checkbox"/>										
	<input checked="" type="checkbox"/>										
	<input checked="" type="checkbox"/>										
	<input checked="" type="checkbox"/>										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H. W. Keiser, Sr. V.P.
Nuclear Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 717 5423220
 DATE: 91 06 12
 AREA CODE: 717 NUMBER: 5423220 YEAR: 91 MO: 06 DAY: 12

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING.

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

NAME PENNSYLVANIA P & L - SUSQUHNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325
 PERMIT NUMBER

371 A
 DISCHARGE NUMBER

MAJOR (SUBR 02)
 F - FINAL
 NEUTRALIZATION BASIN DISCHARGE

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAM, VICE PRESIDENT

MONITORING PERIOD
 FROM YEAR 91 MO. 05 DAY 01 TO YEAR 91 MO. 05 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	26.7	26.7	(19)	0	1/31 Grab	
	PERMIT REQUIREMENT	*****	*****	***	*****	30.0	100.0			ONCE/ GRAB MONTH	
				****		MNTH AVG	DLY MAX	MG/L			
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	0.0	0.0	(19)	0	1/31 Gr	
	PERMIT REQUIREMENT	*****	*****	***	*****	15.0	20.0			ONCE/ GRAB MONTH	
				****		MNTH AVG	DLY MAX	MG/L			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.018	0.029	(03)	*****	*****	*****	()	*	11/31 Est.	
	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****		DAILY ESTIMA	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE		DATE	
H.W. Keiser, Sr. U.P. Nuclear Operations TYPED OR PRINTED								717 5423220		91	06

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

FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING. *EM. FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING. THERE SHALL BE NO DISCHARGE OF POLYCHLORINATED BIPHENYL COMPOUNDS. SEE PERMIT FOR OTHER CONDITIONS.

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

NAME PENNSYLVANIA P & L - SUSQUHUNNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325
 PERMIT NUMBER

471 A
 DISCHARGE NUMBER

MAJOR (SUBR 02)
 F - FINAL
 WASTE FILTER EFFLUENT

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAM, VICE PRESIDENT

MONITORING PERIOD
 FROM YEAR 91 MO 05 DAY 01 TO YEAR 91 MO 05 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED		*****	*****	()	*****			(19)		
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 Mnth Avg	100.0 Dly Max	MG/L	ONCE/ GRAB MONTH	
OIL AND GREASE FROM EXTR-GRAV METH		*****	*****	()	*****			(19)		
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 Mnth Avg	20.0 Dly Max	MG/L	ONCE/ GRAB MONTH	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT				(03)	*****	*****	*****	()		
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****	DAILY FLOIND	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H. W. Keiser, Sr. V.P.
Nuclear Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 717 5423220
 DATE 91 06 12
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING.

PERMITTEE NAME/ADDRESS (Include

Facility Name/Location if different)

NAME PENNSYLVANIA P & L - SUSQUHNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0047325
 PERMIT NUMBER

571 A
 DISCHARGE NUMBER

MAJOR
 (SUBR 02)
 F - FINAL
 571 CIRC WATER PUMPHOUSE SUMP

FACILITY _____
 LOCATION _____
 ATTN: R. G. BYRAM, VICE PRESIDENT

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	05	01		91	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	4.5	4.5	(19)	0	1/31 Grab
	PERMIT REQUIREMENT	*****	*****	***	*****	30.0 Mnth Avg	100.0 Dly Max	MG/L		ONCE/MONTH GRAB
OIL AND GREASE PREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	2.6	2.6	(19)	0	1/31 Gr
	PERMIT REQUIREMENT	*****	*****	***	*****	15.0 Mnth Avg	20.0 Dly Max	MG/L		ONCE/MONTH GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0225	0.0225	(03)	*****	*****	*****	()	*	31/31 FLOW IND
	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	***		DAILY FLOW IND
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H.W. Keiser, Sr. U.P.
Nuclear Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

[Signature]
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
717 5423220
 AREA CODE NUMBER
 DATE
91 05 12
 YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING.