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REGULATORY INFORMATION DISTRIBUTION SYSTEM (RIDS)

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 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
 FIELDS, J.S. Pennsylvania Power & Light Co.
 RECIP. NAME RECIPIENT AFFILIATION

SUBJECT: "NPDES Discharge Monitoring Rept for Sept 1991." W/911024
 ltr.

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NOTE TO ALL "RIDS" RECIPIENTS:

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Pennsylvania Power & Light Company

Two North Ninth Street • Allentown, PA 18101-1179 • 215/774-5151

October 24, 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 - SEPTEMBER 1991
NPDES PERMIT NO. PA 0047325
CCN 741326 FILE R9-8A
PLE-14830

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 September 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

9110300143 910930
PDR ADOCK 05000387
R PDR

IE48
11



Vertical text on the right side of the page, possibly a page number or reference code, consisting of a series of small, faint characters.

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Faint, illegible markings or text in the bottom right corner.

01-112

PA DEPARTMENT OF ENVIRONMENTAL RESOURCES

Month September 1991

MONTHLY FACILITY REPORT

Date Prepared October 24, 1991

Facility Name Susquehanna Steam Electric Station PWS ID NO. 2400994

P.O. Box 467

Facility Address 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) _____
- (b) Where _____
- (c) When (Last Occurrence) _____
- (d) Hauler _____
- (e) Receipts: Yes ___ No ___

- (a) How Much (Tons) 85
- (b) Where Waste Conversion *
- (c) When (Last Occurrence) 9/30/91
- (d) Hauler Keystone Block
- (e) Receipts: Yes ___ No X

8. Other Wastes (Grits, Barscreening, etc.)

- (a) How Much (Tons) 21.25 (sewage sludge)
- (b) Where Mowery Farm**
- (c) When (Last Occurrence) 9/19/91
- (d) Hauler Biebers Contracting Company
- (e) Receipts: Yes ___ No X

*Waste Conversion
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: 1,000 gallons of septic tank waste taken offsite and treated at Greater Hazleton Sewer Authority (Permit #0026921)

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)

PA0047325
 PERMIT NUMBER

071 A
 DISCHARGE NUMBER

MAJOR Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.
 COOLING TOWER BLOWDOWN

FACILITY _____
 LOCATION _____

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
91	09	01		91	09	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

ATTN: R. G. HYMAN, VICE PRESIDENT

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-55)	MAXIMUM (56-57)	UNITS (58)	MINIMUM (46-47)	AVERAGE (48-49)	MAXIMUM (50-51)	UNITS (52)			
PH		*****	*****	()	7.8	*****	8.5	(12)	0	30/30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	6.0	*****	9.0				DAILY GRAB
ZINC, TOTAL (AS ZN)		*****	*****	()	*****	*****	0.39	(19)	0	1/7	COMP-8
01092 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	*****	1.0				WEEKLY COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		14.67	19.55	(03)	*****	*****	*****	()	*	30/30	RCOADR
50050 1 0 0 EFFLUENT GROSS VALUE		REPORT	REPORT		*****	*****	*****	****			DAILY RCOADR
CHLORINE, FREE AVAILABLE		*****	*****	()	*****	*****	10.05	(19)	0	27/30	GRAB
50064 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	*****	.20	See the note (1)			SEE GRAB PERMIT
							DLY MAX	MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 H.W. Keiser Sr. V.P.
 Nuclear Operations

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 USC § 1001 AND 33 USC § 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
[Signature]

TELEPHONE 717 | 342-3220
 DATE 91 | 10 | 18

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 FREE AVAILABLE CHLORINE SHALL BE TAKEN DAILY BY GRAB DURING CHLORINATION.
 #1 There were no chlorinations on 3 days during September

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

NAME PENNSYLVANIA P. & L. - SUSQUEHUNNA
 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 Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.
 SERV AND ADMIN BUILDING SUMP

FACILITY _____
 LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	09	01		91	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

ATTN: R. G. BYRAM, VICE PRESIDENT

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(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	UNITS			
PH		*****	*****	()	7.15	*****	7.15	(12)	0	1/30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED		*****	*****	()	*****	5.54	5.54	(19)	0	1/30	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	30.0 Mnth Avg	100.0 Dly Max	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH		*****	*****	()	*****	0.0	0.0	(19)	0	1/30	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	15.0 Mnth Avg	20.0 Dly Max	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.0105	0.0105	(03)	*****	*****	*****	()	*	1/30	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE		REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		DAILY	ESTIMA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A.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 USC § 1001 AND 33 USC § 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 717 542-3220
 DATE 91 10 18
 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

FACILITY _____
 LOCATION _____

ATTN: R. G. BYRAM, VICE PRESIDENT

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

(2-16)

(17-19)

PA0047325

073 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.

#1 TURBINE BLDG WASTE SUMP

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	09	01		91	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ~~X~~ ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(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	*****	*****	()		*****		(12)		
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****			(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 PERON EXTH-GRAB METH	SAMPLE MEASUREMENT	*****	*****	()	*****			(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	SAMPLE MEASUREMENT			(03)	*****	*****	*****	()		
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		DAILY ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

H.W. Kaiser 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 USC § 1001 AND 33 USC § 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

DATE

717 | 542-3220 | 91 | 10 | 18
 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)

PA0047325
 PERMIT NUMBER

074 A
 DISCHARGE NUMBER

MAJOR Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.
 #2 TURBINE BLDG WASTE SUMP

FACILITY _____
 LOCATION _____

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
91	09	01		91	09	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

ATTN: R. G. BYRAM, VICE PRESIDENT

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
PH		*****	*****	()	7.85	*****	7.85	(12)	0	1/30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU			DAILY GRAB
SOLIDS, TOTAL SUSPENDED		*****	*****	()	*****	1.1	1.1	(19)	0	1/30	GRAB
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 FREON EXTR-GRAV METH		*****	*****	()	*****	1.5	1.5	(19)	0	1/30	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 Mnth Avg	20.0 Dly Max	NG/L			ONCE/ GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.0085	0.0085	(03)	*****	*****	*****	()	*	1/30	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****			DAILY ESTIMA
	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 USC § 1001 AND 33 USC § 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 717 542-3220
 DATE 91 10 18

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 & I - SUSQUEHNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

FACILITY _____
 LOCATION _____

ATTN: R. G. BYRAM, VICE PRESIDENT

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

PAC047325
 PERMIT NUMBER

079 A
 DISCHARGE NUMBER

MAJOR Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.
 SEWAGE TREATMENT EFFLUENT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
91	09	01		91	09	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (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	*****	*****	()	7.05	*****	7.55	(12)	0	30/30	GRAB
00400 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU			DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.32	*****	(26)	*****	3.0	*****	(19)	*	1/30	COMP-8
00530 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	20.00 Mnth Avg	*****	LBS/DY	*****	30.00 Mnth Avg	*****	MG/L			ONCE/ MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0156	0.0266	(03)	*****	*****	*****	()	*	30/30	FLOWD
50050 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	0.08 Mnth Avg	REPORT DLY MAX	MGD	*****	*****	*****	****			DAILY FLOWD
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	()	0.15	0.27	0.50	(19)	*	30/30	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	*****	*****	()	*****	<3.0	*****	(13)	*	1/30	GRAB
74055 A 1 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	*****	200 30DA GEO	*****	1/ 100ML			ONCE/ GRAB MONTH
BOD, CARBONACEOUS 05 DAY, 20C	SAMPLE MEASUREMENT	0.27	*****	(26)	*****	2.5	*****	(19)	*	1/30	COMP-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
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 USC § 1001 AND 33 USC § 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 717 542-3220
 DATE 91 10 18
 AREA CODE NUMBER YEAR MO DAY

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

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)

PA0047325
 PERMIT NUMBER

171 A
 DISCHARGE NUMBER

MAJOR Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.
 RADWASTE TREATMENT EFFLUENT

FACILITY _____
 LOCATION _____

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
91	09	01	91	09	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

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

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 (38-45)			(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 PERMIT REQUIREMENT	*****	*****	()	*****	0.0	0.0	(19)	0	1/30	GRAB		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	0.0095	0.02125	(03)	*****	30.0	100.0	()	*	7/30	ESTIM		
		REPORT	REPORT	MGD	*****	MNTH AVG	DLY MAX	MG/L	*****	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 USC § 1001 AND 33 USC § 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
 AREA CODE NUMBER
 DATE
91 10 18
 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 - SUSQUEHNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

FACILITY _____
 LOCATION _____

ATTN: R. G. BYRAM, VICE PRESIDENT

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

PA0047325
 PERMIT NUMBER

271 A
 DISCHARGE NUMBER

MAJOR Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.
 WASTE FILTER BYPASS

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
91 09 01 TO 91 09 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (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	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
	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	*****	*****	()	*****			(19)			
	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			(03)	*****	*****	*****	()			
	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. 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 USC § 1001 AND 33 USC § 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 717/542-3220
 DATE 91 10 18
 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 - SUSQUEHanna
 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 Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.

NEUTRALIZATION BASIN DISCHARGE

FACILITY _____
 LOCATION _____

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
91	09	01		91	09	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

ATTN: R. G. BYRAM, VICE PRESIDENT

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	SAMPLE MEASUREMENT	*****	*****	()	*****	8.5	8.5	(19)	0	1/30 GRAB
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	30.0	100.0			ONCE/MONTH GRAB
EFFLUENT GROSS VALUE				***		MNTH AVG	DLY MAX	MG/L		
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****	3.6	3.6	(19)	0	1/30 GRAB
FREON EXTR-GRAY METH	PERMIT REQUIREMENT	*****	*****	***	*****	15.0	20.0			ONCE/MONTH GRAB
00556 1 0 0				***		MNTH AVG	DLY MAX	MG/L		
EFFLUENT GROSS VALUE				***						
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.018	0.020	(03)	*****	*****	*****	()	*	4/30 ESTIMA
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	*****		DAILY ESTIMA
EFFLUENT GROSS VALUE		MNTH AVG	DLY MAX	MGD						
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	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 USC § 1001 AND 33 USC § 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 717 542-3220
 DATE 91 10 18
 AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PENNSYLVANIA P & I - SUSQUEHNA
ADDRESS TWO NORTH NINTH STREET
 ALLENTOWN PA 18101
FACILITY
LOCATION
ATTN: R. G. BYHAM, VICE PRESIDENT

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
PAG0047325 (2-16) **471 A** (17-19)
 PERMIT NUMBER DISCHARGE NUMBER
MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 91 09 01 TO 91 09 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.
WASTE FILTER EFFLUENT
 *** 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 (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	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 Mnth Avg	100.0 Dly Max	MG/L		ONCE/ GRAB MONTH	
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 Mnth Avg	20.0 Dly Max	MG/L		ONCE/ GRAB MONTH	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	*****	*****	*****	()			
	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		DAILY FLOWING	
	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 USC § 1001 AND 33 USC § 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 <i>[Signature]</i>	TELEPHONE	DATE		
			717/542-3220	91	10	18
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)	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 - SUSQUEHANNA
 ADDRESS TWO NORTH NINTH STREET
ALLENTOWN PA 18101

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

PA0047325
 PERMIT NUMBER

571 A
 DISCHARGE NUMBER

MAJOR Form Approved.
 (SUBR 02) OMB No. 2040-0004.
 F - FINAL Approval expires 6-30-91.
 571 CLRC WATER PUMPHOUSE SUMP

FACILITY _____
 LOCATION _____

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
91	09	01		91	09	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

ATTN: R. G. BYRAM, VICE PRESIDENT

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (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	SAMPLE MEASUREMENT	*****	*****	()	*****	0.02	0.02	(19)	0	1/30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0			ONCE/ MONTH	GRAB
				****		MNTH AVG	DLY MAX	MG/L			
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	7.79	7.79	(19)	0	1/30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0			ONCE/ MONTH	GRAB
				****		MNTH AVG	DLY MAX	MG/L			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0274	0.0274	(03)	*****	*****	*****	()	*	30/30	FLOIND
	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****		DAILY	FLOIND
		MNTH AVG	DLY MAX	MGD				****			
	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 USC § 1001 AND 33 USC § 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 717/342-3220
 DATE 91 10 18
 AREA CODE NUMBER YEAR MO DAY

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