





Pennsylvania Power & Light Company

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

November 21, 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 - OCTOBER 1991  
NPDES PERMIT NO. PA 0047325  
CCN 741326 FILE R9-8A  
PLE-14951

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 October 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

9111270157 911031  
PDR ADOCK 05000387  
R PDR

Handwritten initials/signature

01-112

PA DEPARTMENT OF ENVIRONMENTAL RESOURCES

Month October 1991

MONTHLY FACILITY REPORT

Date Prepared November 20, 1991

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) \_\_\_\_\_

(b) Where \_\_\_\_\_

(c) When (Last Occurrence) \_\_\_\_\_

(d) Hauler \_\_\_\_\_

(e) Receipts: Yes \_\_\_ No \_\_\_

(a) How Much (Tons) 42.5

(b) Where Waste Conversion\*

(c) When (Last Occurrence) 10/24/91

(d) Hauler Keystone Block

(e) Receipts: Yes \_\_\_ No X

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

(a) How Much (Tons) \_\_\_\_\_

(b) Where \_\_\_\_\_

(c) When (Last Occurrence) \_\_\_\_\_

(d) Hauler \_\_\_\_\_

(e) Receipts: Yes \_\_\_ No \_\_\_

\*Waste Conversion  
Hatfield, PA

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: 17,200 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. & 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)  
 (2-16) (17-19)

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

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	10	01		91	10	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)	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			
PH		*****	*****	( )	8.40	*****	8.65	( 12)	0	3/31 GRAB
00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY GRAB
ZINC, TOTAL (AS ZN)		*****	*****	( )	*****	*****	0.37	( 19)	0	1/2 COMP-8
01092 1 0 0 EFFLUENT GROSS VALUE		*****	*****	*****	*****	*****	1.0 DLY MAX	MG/L		WEEKLY COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		12.76	17.33	( 03)	*****	*****	*****	( )	*	3/31 RECORD
50050 1 0 0 EFFLUENT GROSS VALUE		REPORT MTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	*****		DAILY RECORD
CHLORINE, FREE AVAILABLE		*****	*****	( )	*****	*****	<0.05	( 19)	0	3/31 GRAB
50064 1 0 0 EFFLUENT GROSS VALUE		*****	*****	*****	*****	*****	.20 DLY MAX	MG/L		SEE GRAB PERMIT

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 11 18  
 AREA CODE NUMBER YEAR MO DAY

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

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

(2-16) **PA0047325** (17-19) **072 A**  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR Form Approved.  
 (SUBR 02) OMB No. 2040-0004.  
 P - FINAL Approval expires 6-30-91.  
 SERV AND ADMIN BUILDING SUMP

FACILITY \_\_\_\_\_  
 LOCATION \_\_\_\_\_

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	10	01		91	10	31
	(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 (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
PH		*****	*****	( )	7.5	*****	7.30	( 12)	0	2/31	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0				DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	( )	*****	2.3	2.3	( 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	*****	*****	( )	*****	7.5	7.5	( 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)	*****	*****	*****	( )	*	2/31	ESTIMA
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****			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	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.)	TELEPHONE	DATE			
H. W. Keiser Sr. V.P. Nuclear Operations		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	717   542-3223	91	11	18
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)

PA0047325  
 PERMIT NUMBER

073 A  
 DISCHARGE NUMBER

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

FACILITY  
 LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	10	01		91	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

\*\*\* NO DISCHARGE | 1 | \*\*\*  
 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 (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
PH	SAMPLE MEASUREMENT	*****	*****	( )	7.80	*****	7.85	( 12 )	0	2/31	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	*****	*****	( )	*****	2.6	2.6	( 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	0.0085	0.0085	( 03 )	*****	*****	*****	( )	*	2/31	ESTIMA
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 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 11 18  
 AREA CODE: 717 NUMBER: 542-3220 YEAR: 91 MO: 11 DAY: 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. & 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

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	10	01		91	10	31
(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) (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	SAMPLE MEASUREMENT	*****	*****	( )	7.75	*****	7.75	( 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	*****	*****	( )	*****	1.1	1.1	( 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
PREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0				ONCE/ GRAB MONTH
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0085	0.0085	( 03)	*****	*****	*****	( )	*	1/31	ESTIMA
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 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 11 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 & I - SUSQUEHNA  
 ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

PA0047325  
 PERMIT NUMBER

079 A  
 DISCHARGE NUMBER

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

FACILITY \_\_\_\_\_  
 LOCATION \_\_\_\_\_

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
91	10	01		91	10	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

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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
PH	*****	*****	( )	7.10	*****	8.40	( 12 )	0	3/31	GRAB	
00400 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	6.0	*****	9.0	SO			DAILY GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.45	*****	( 26 )	*****	3.00	( 19 )	*	1/31	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 COMP-8	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0171	0.0223	( 03 )	*****	*****	( )	*	3/31	FLOIND	
50050 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	0.08 Mnth Avg	REPORT DLY MAX	MGD	*****	*****	****			DAILY FLOIND	
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	( )	0.15	0.28	0.50	( 19 )	*	3/31	GRAB
50064 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	REPORT ARI MEAN	REPORT MAXIMUM	MG/L		DAILY GRAB	
COLIFORM, PECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	( )	*****	1696	*****	( 13 )	*	2/31	GRAB
74055 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	*****	2000 30DA GEO	*****	#/ 100ML		ONCE/ GRAB MONTH	
BOD, CARBONACEOUS 05 DAY, 20C	SAMPLE MEASUREMENT	0.63	*****	( 26 )	*****	4.2	*****	( 19 )	*	1/31	COMP
80082 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	16.70 Mnth Avg	*****	LBS/DY	*****	25.0 Mnth Avg	*****	MG/L		ONCE/ MONTH COMP-8	
	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 11 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. E. I. - 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

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	TO	YEAR	MO	DAY
91	10	01		91	10	31
(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				
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	*****	*****	( )	*****	0.0	0.0	( 19)	0	1/31	GRAB	
PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0			ONCE/ MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	0.0064	0.0230	( 03)	*****	*****	*****	( )	*	8/31	ESTIMA	
PERMIT REQUIREMENT	REPORT MONTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****		DAILY ESTIMA		
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 11 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. - SUSQUEHNA  
**ADDRESS** TWO NORTH NINTH STREET  
 ALLENTOWN PA 18101

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

FACILITY  
 LOCATION

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	10	01		91	10	31
	(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)			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	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0		ONCE/ GRAB	
EFFLUENT GROSS VALUE						MONTH AVG	DLY MAX	MG/L	MONTH	
OIL AND GREASE		*****	*****	( )	*****					
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0		ONCE/ GRAB	
00556 1 0 0						MONTH AVG	DLY MAX	MG/L	MONTH	
EFFLUENT GROSS VALUE										
FLOW, IN CONDUIT OR THRU TREATMENT PLANT				( 03)	*****	*****	*****			
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****	DAILY FLOIND	
EFFLUENT GROSS VALUE		MONTH AVG	DLY MAX					****		
	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. 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 11 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. & I. - SUSQDHNA  
 ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

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							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	10	01		91	10	31
	(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)			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	*****	*****	( )	*****	1.3	1.3	( 19)	0	1/31	GRAB
PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAY METH 00556 1 0 0 EFFLUENT GROSS VALUE	*****	*****	( )	*****	6.2	6.2	( 19)	0	1/31	GRAB
PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	0.0191	0.0360	( 03)	*****	*****	*****	( )	*	8/31	ESTIMA
PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		DAILY	ESTIMA
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										

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 11 18

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. E. I. - SUSQUEHNA  
 ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

PA0047325  
 PERMIT NUMBER

471 A  
 DISCHARGE NUMBER

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

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	10	01		91	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

\*\*\* NO DISCHARGE ~~1~~ \*\*\*  
 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 (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	*****	*****	( )	*****			( 19)		
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0		ONCE/ GRAB	
EFFLUENT GROSS VALUE						NMTH AVG	DLY MAX	MG/L	MONTH	
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	( )	*****			( 19)		
PREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0		ONCE/ GRAB	
00556 1 0 0						NMTH AVG	DLY MAX	MG/L	MONTH	
EFFLUENT GROSS VALUE										
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			( 03)	*****	*****	*****	( )		
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****	DAILY FLOW	
EFFLUENT GROSS VALUE		NMTH AVG	DLY MAX					****		
	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  
 AREA CODE NUMBER  
 DATE  
91 11 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

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

PA0047325  
 PERMIT NUMBER

571 A  
 DISCHARGE NUMBER

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

FACILITY  
 LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	10	01		91	10	31
	(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 (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	SAMPLE MEASUREMENT	*****	*****	( )	*****	4.6	4.6	( 19)	0	1/31	GRAB
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0			ONCE/	GRAB
EFFLUENT GROSS VALUE				****		MNTH AVG	DLY MAX	MG/L		MONTH	
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	( )	*****	0.0	0.0	( 19)	0	1/31	GRAB
PREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0			ONCE/	GRAB
00556 1 0 0				****		MNTH AVG	DLY MAX	MG/L		MONTH	
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0363	0.0363	( 03)	*****	*****	*****	( )	*	31/31	FLOWD
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****		DAILY	FLOWD
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

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TELEPHONE 717 542-3220  
 DATE 91 11 18  
 AREA CODE NUMBER YEAR MO DAY

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