





**Pennsylvania Power & Light Company**

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

December 23, 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 - NOVEMBER 1991  
NPDES PERMIT NO. PA 0047325  
CCN 741326 FILE R9-8A  
PLE- 15060

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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 November 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

9201070265 911130  
PDR ADOCK 05000387  
R PDR



LEAS  
11

01-112

PA DEPARTMENT OF ENVIRONMENTAL RESOURCES

Month November 1991

MONTHLY FACILITY REPORT

Date Prepared December 26, 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) 42.5

(b) Where Waste Conversion\*

(c) When (Last Occurrence) 11/26/91

(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: 2,000 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 & 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 071 A  
 PERMIT NUMBER DISCHARGE NUMBER

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

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

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	11	01		91	11	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. HYRAM, 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 (46-53)	MAXIMUM (54-61)	UNITS (54-61)	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
PH	SAMPLE MEASUREMENT	*****	*****	( )	8.2	*****	8.6	( 12)	0	30/30 GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY GRAB
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	*****	*****	( )	*****	*****	0.62	( 19)	0	1/7 COMP
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	SAMPLE MEASUREMENT	11.54	12.27	( 03)	*****	*****	*****	( )	*	30/30 RECORD
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MTH AVG	REPORT DLY MAX	HGD	*****	*****	*****	***		DAILY RECORD
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	( )	*****	*****	<0.05	( 19)	0	30/30 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  
 H.W. Keiser Jr. V.P.  
 Nuclear Operations  
 TYPED OR PRINTED

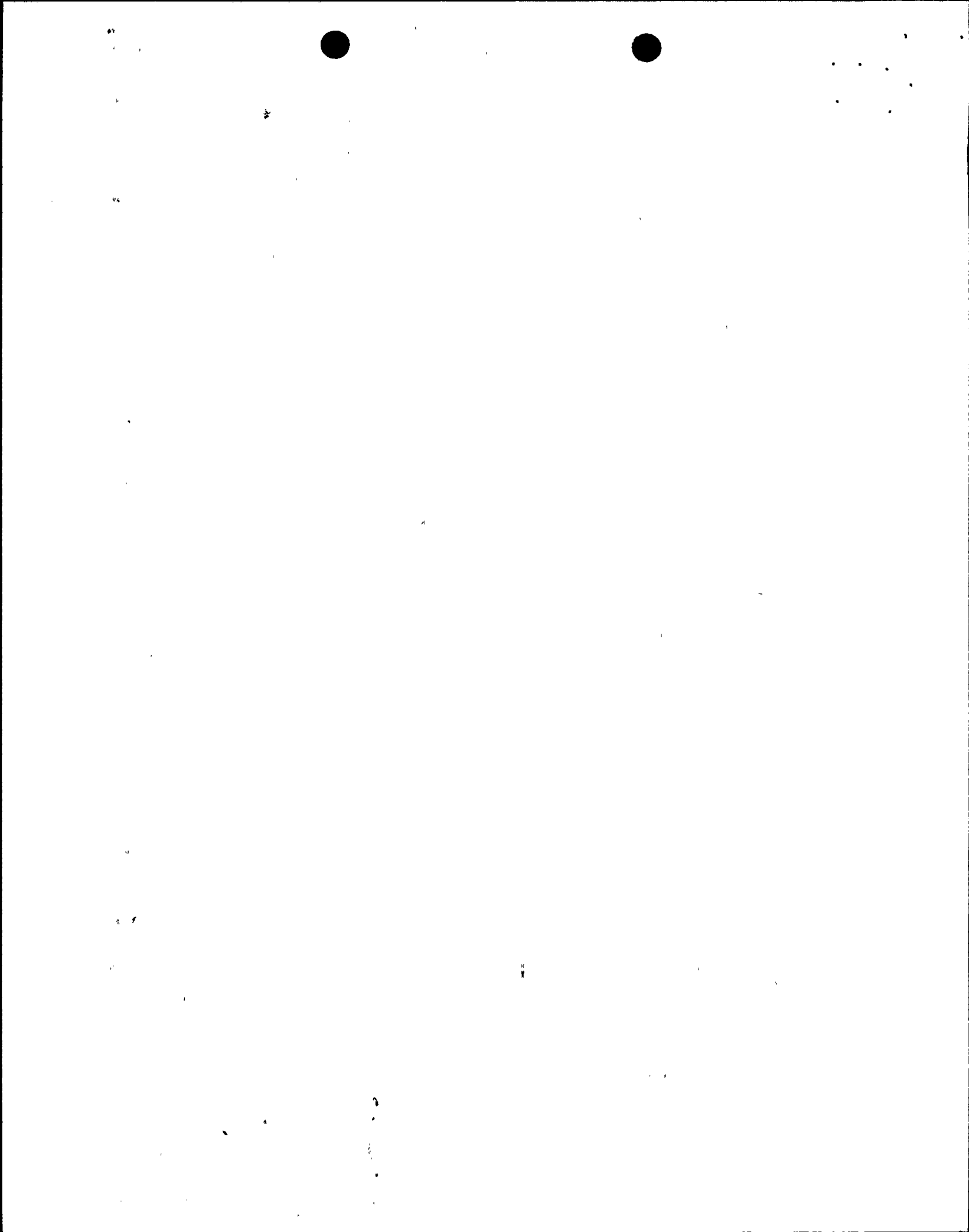
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE 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 3 years.)

*[Signature]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 717 542-2220  
 DATE 91 12 19  
 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) (17-19)  
**PA0047325** **072 A**  
 PERMIT NUMBER 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	11	01		91	11	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 (54-53)			(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		*****	*****	( )	7.1	*****	7.1	( 12)	0	1/30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	6.0	*****	9.0	SU		DAILY	GRAB
	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM				
SOLIDS, TOTAL SUSPENDED		*****	*****	( )	*****	9.4	9.4	( 19)	0	1/30	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	30.0	100.0	MG/L		ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	MONTH AVG	DLX MAX				
OIL AND GREASE		*****	*****	( )	*****	5.7	5.7	( 19)	0	1/30	GRAB
PREON EXTR-GRAY METH	SAMPLE MEASUREMENT	*****	*****	****	*****	15.0	20.0	MG/L		ONCE/ MONTH	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	MONTH AVG	DLX MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.021	0.021	( 03)	*****	*****	*****	( )	*	1/30	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MONTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****		DAILY	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

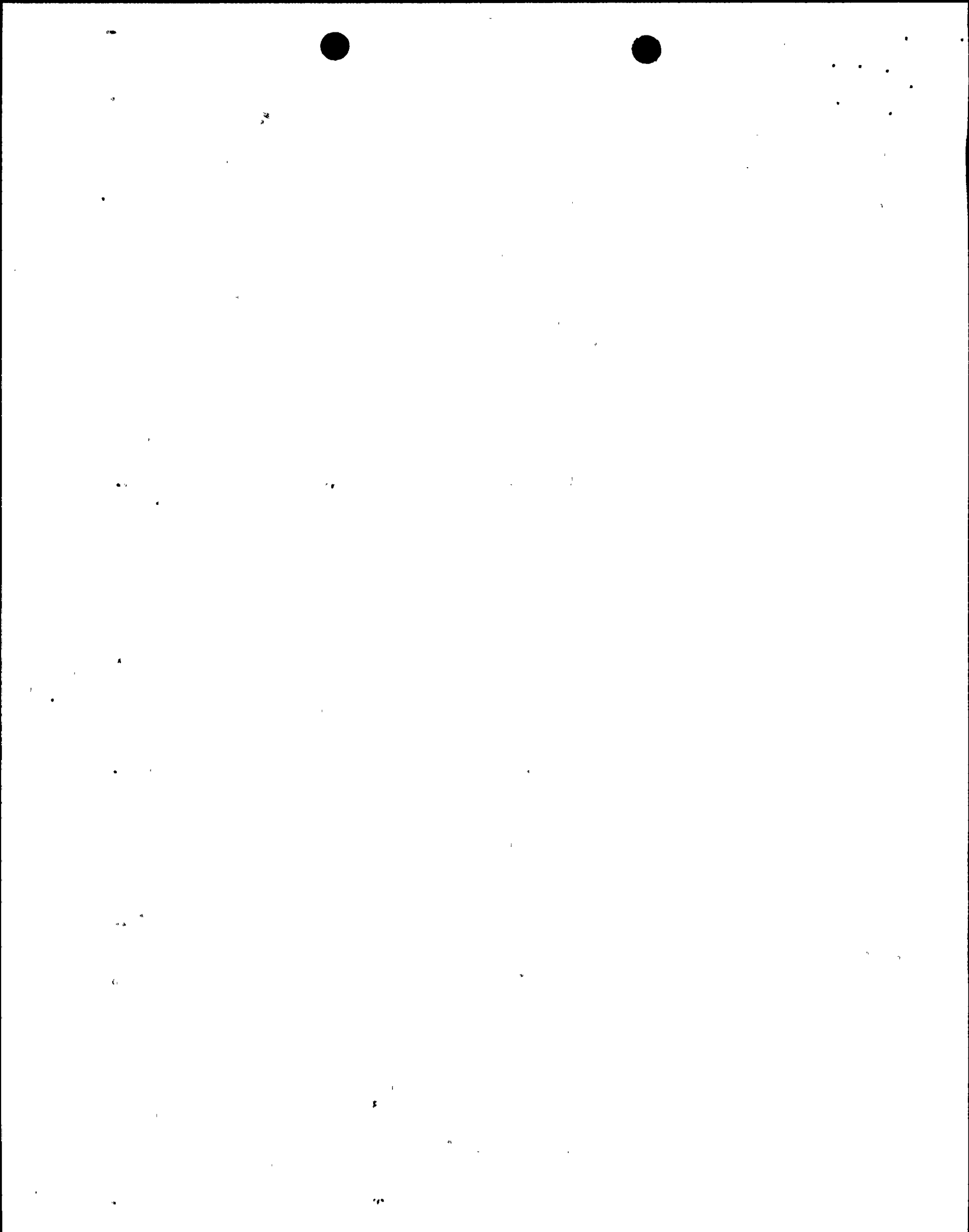
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 A.W. Keiser Sr. V.P.  
 Nuclear Operations  
 TYPED OR PRINTED

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 3 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
*[Signature]*

TELEPHONE: 717 542-3220  
 DATE: 91 12 19  
 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)

PERMIT NUMBER PA0047325 (2-16)  
 DISCHARGE NUMBER 073 A (17-19)

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

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

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	11	01		91	11	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 (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	*****	*****	( )	7.5	*****	7.7	( 12)	0	7/30 GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	( )	*****	0.1	0.1	( 19)	0	1/30 GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 MTH AVG	100.0 DLY MAX	MG/L		ONCE/ GRAB MONTH
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	( )	*****	1.4	1.4	( 19)	0	1/30 GRAB
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 MTH AVG	20.0 DLY MAX	MG/L		ONCE/ GRAB MONTH
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.013	0.017	( 03)	*****	*****	*****	( )	*	2/30 ESTIMA
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT MTH AVG	REPORT DLY MAX	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 Jr. 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 3 years.

*[Signature]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 717 342-5200  
 DATE 91 12 19  
 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)  
 (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	11	01		91	11	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
PH		*****	*****	( )	7.8	*****	7.9	( 12)	0	2/30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	6.0	*****	9.0			DAILY	GRAB
	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED		*****	*****	( )	*****	1.0	1.0	( 19)	0	1/30	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	30.0	100.0			ONCE/	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	MONTH AVG	DLY MAX	MG/L		MONTH	
OIL AND GREASE		*****	*****	( )	*****	5.4	5.4	( 19)	0	1/30	GRAB
FREON EXTR-GRAB METH		*****	*****	****	*****	15.0	20.0			ONCE/	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	MONTH AVG	DLY MAX	MG/L		MONTH	
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	( )	*	2/30	ESTIMA
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.0085	0.0085	( 03)	*****	*****	*****	****		DAILY	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	REPORT	REPORT	****	*****	*****	*****	****			
	PERMIT REQUIREMENT	MONTH AVG	DLY MAX	MGD	*****	*****	*****	****			
	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 12 19  
 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

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	11	01		91	11	30

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

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

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			
PH		*****	*****	( )	7.05	*****	7.65	( 12)	0	30/30 GRAB
00400 A 0 0 DISINFECT, PRCS CMPLT		*****	*****	****	6.0	*****	9.0			DAILY GRAB
SOLIDS, TOTAL SUSPENDED		*****	*****	( 26)	*****	3.5	*****	( 19)	*	1/30 COMP-8
00530 A 0 0 DISINFECT, PRCS CMPLT		20.00	*****	LBS/DY	*****	30.00	*****			ONCE/ MONTH COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.0184	0.0236	( 03)	*****	*****	*****	( )	*	30/30 FLOWO
50050 A 0 0 DISINFECT, PRCS CMPLT		0.08	REPORT	MGD	*****	*****	*****	****		DAILY FLOWO
CHLORINE, FREE AVAILABLE		*****	*****	( )	0.15	0.35	0.50	( 19)	*	30/30 GRAB
50064 A 0 0 DISINFECT, PRCS CMPLT		*****	*****	****	REPORT	REPORT	REPORT			DAILY GRAB
COLIFORM, FECAL GENERAL		*****	*****	( )	*****	<3	*****	( 13)	*	1/30 GRAB
74055 A 0 0 DISINFECT, PRCS CMPLT		*****	*****	****	*****	2000	*****	/		ONCE/ GRAB MONTH
BOD, CARBONACEOUS 05 DAY, 20C		0.66	*****	( 26)	*****	4.1	*****	( 19)	*	1/30 COMP
80082 A 0 0 DISINFECT, PRCS CMPLT		16.70	*****	LBS/DY	*****	25.0	*****			ONCE/ MONTH COMP-8

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 717 542-2190  
 DATE 91 12 19  
 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.  
 P - FINAL Approval expires 6-30-91.  
 RADWASTE TREATMENT EFFLUENT

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

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	11	01		91	11	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) (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 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	( )	*****	0.0	0.0	( 19)	0	1/30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 Mnth Avg	100.0 Dly Max	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT	0.021	0.042	( 03)	*****	*****	*****	( )	*	6/30	ESTIMA
	PERMIT REQUIREMENT	REPORT Mnth 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 3 years.)

[Signature]  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

717 | 542-3220

DATE

91 | 12 | 19

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 - 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

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	
91	11	01		91	11	30	
(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	(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 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 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/ 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	FLOID
	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 OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
717 542-3220  
 AREA CODE NUMBER  
 DATE  
91 12 19  
 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 - SUSSOHNNA  
 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.  
 P - FINAL Approval expires 6-30-91.  
 NEUTRALIZATION BASIN DISCHARGE.

FACILITY  
 LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	91	11	01		91	11	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)			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	*****	*****	( )	*****	24.6	45.0	( 19)	0	3/30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0			ONCE/ MONTH	GRAB
OIL AND GREASE FROM EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	( )	*****	0.0	0.0	( 19)	0	1/30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0			ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.6238	0.0530	( 03)	*****	*****	*****	( )	*	12/30	ESTIMA
	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		DAILY	ESTIMA
	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  


TELEPHONE 717 542-3220  
 DATE 91 12 19  
 AREA CODE NUMBER YEAR MO DAY

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

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



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)  
**PA0047325**  
 PERMIT NUMBER

(17-19)  
**471 A**  
 DISCHARGE NUMBER

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

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

MONITORING PERIOD

FROM YEAR 91 MO 11 DAY 01 TO YEAR 91 MO 11 DAY 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) (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	*****	*****	( )	*****			( 19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 METH 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 METH 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 METH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****	DAILY FLOWED	
	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

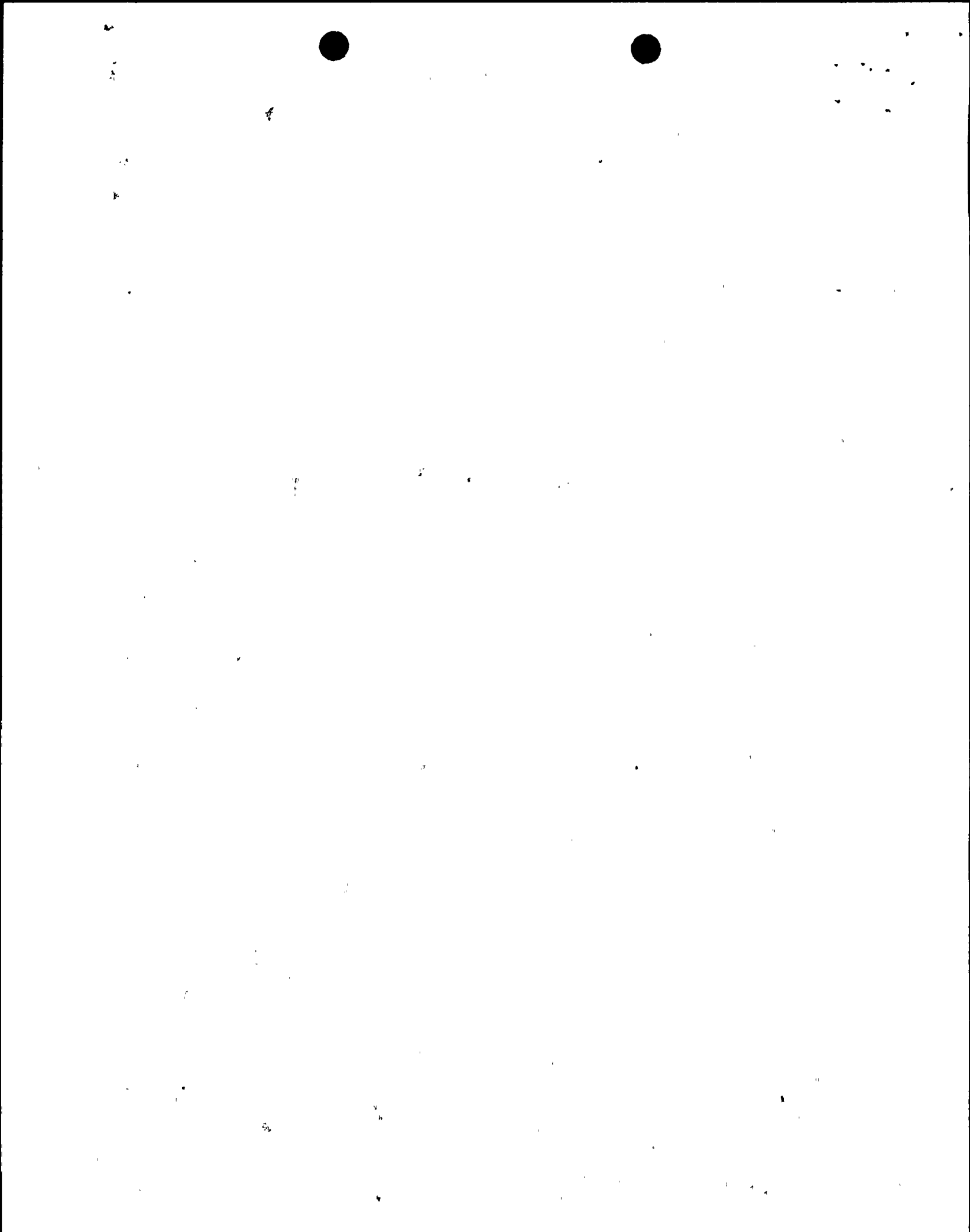
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT 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

TELEPHONE  
 717 | 542-3220  
 AREA CODE NUMBER  
 DATE  
 91 | 12 | 19  
 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 - SUSQUEHNA  
 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 CIRC WATER PUMPHOUSE SUMP

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

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
91	11	01		91	11	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 00530 1 0 0 EFFLUENT GROSS VALUE	*****	*****	( )	*****	2.7	2.7	( 19)	0	1/30	GRAB
PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	*****	*****	( )	*****	2.3	2.3	( 19)	0	1/30	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	0.0683	0.0683	( 03)	*****	*****	*****	( )	*	30/30	FLOWED
PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		DAILY FLOWED	
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 | 12 | 19  
 YEAR MO DAY

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