

01-112

PA DEPARTMENT OF ENVIRONMENTAL RESOURCES

Month July 1994

MONTHLY FACILITY REPORT

Date Prepared 8/19/94

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 (717) 542-1879

Person Completing Form Curtis H. Saxton
(Print Name)

Signature *Curtis H. Saxton*

Title 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) _____	(a) How Much (Tons) _____
(b) Where _____	(b) Where _____
(c) When (Last Occurrence) _____	(c) When (Last Occurrence) _____
(d) Hauler _____	(d) Hauler _____
(e) Receipts: Yes ___ No ___	(e) Receipts: Yes ___ No ___

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

(a) How Much (Tons) _____
 (b) Where _____
 (c) When (Last Occurrence) _____
 (d) Hauler _____
 (e) Receipts: Yes ___ No ___

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 _____
 9409080014 940731
 PDR ADDCK 05000387
 PDR

12. Additional Comments: Total Septic Tank Waste for July was
2000 gallons from Peach Stew taken offsite and treated at
Hazlet Sewer Authority (Permit # PA-002691)

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

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

PA0047325
 PERMIT NUMBER

071 A
 DISCHARGE NUMBER

MAJOR (SUBR 02) Form Approved OMB No. 2040-0004
 F - FINAL
 COOLING TOWER BLOWDOWN

FACILITY
 LOCATION
 ATR: R. L. DUFF, SUPV OPER TECHNOL

MONITORING PERIOD

FROM	YEAR	MO.	DAY	TO	YEAR	MO.	DAY
	94	07	01		94	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (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		*****	*****		8.45	*****	8.75	(12)	0	3/31	grab	
EFFLUENT GROSS VALU.	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0			DAILY	GRAB	
ZINC, TOTAL (AS Z.)		*****	*****		*****	*****	0.08	(19)	0	4/31	comp	
EFFLUENT GROSS VALU.	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0			WEEKLY	COMP-8	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		15.049	17.76	(03)	*****	*****	*****		*	3/31	RECORD	
EFFLUENT GROSS VALU.	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	*****			DAILY	RECORD
CHLORINE, FREE AVAILABLE		*****	*****		*****	*****		(19)		(1) Footnote		
EFFLUENT GROSS VALU.	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.20			SEE GRAB PERMIT		
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER R.G. Byram, 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>George J. Kennedy</i>	TELEPHONE	DATE		
			717 542-3220	94	8	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 FREE AVAILABLE CHLORINE SHALL BE TAKEN DAILY BY GRAB DURING CHLORINATION. (1) use of chlorine has been discontinued.

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

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

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

PR0047325
 PERMIT NUMBER

072 A
 DISCHARGE NUMBER

MAJOR (SUBR 02) Form Approved OMB No. 2040-0004
 F - FINAL
 SERV AND ADMIN BUILDING SUMP

FACILITY
 LOCATION
 LTR: R. L. JOEL, SOLV OPER TECHNOL

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
94	07	01	TO	94	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.10	*****	7.45	(12)	0	4/31	GRAB
EFFLUENT GROSS VALU.	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	8.0	8.0	(19)	0	4/31	GRAB
EFFLUENT GROSS VALU.	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0			ONCE/ MONTH	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****		*****	1.4	1.4	(19)	0	4/31	GRAB
EFFLUENT GROSS VALU.	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0			ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0105	0.0105	(03)	*****	*****	*****		*	4/31	Estima
EFFLUENT GROSS VALU.	PERMIT REQUIREMENT	REPORT	REPORT	****	*****	*****	*****	****		DAILY	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 R.G. Byram, 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
Roy J. King

TELEPHONE 717 542-3220
 DATE 94 8 22
 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 E & I - SUSQUEHUNNA
ADDRESS 2000 MAIN STREET
ELLENICHT PA 18101

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

2K0047325
 PERMIT NUMBER

073 A
 DISCHARGE NUMBER

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

FACILITY
LOCATION
ATTN: E. L. DOTT, SUPV OPER TECHNOL

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	07	01		94	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (54-61)			(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			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		DAILY GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****			(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0	NG/L		ONCE/ GRAB MONTH	
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****		*****			(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0	NG/L		ONCE/ GRAB MONTH	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	*****	*****	*****				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		DAILY ESTIMA	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
R.G. Byram, Sr. V.P.
Nuclear Operation
 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
[Signature]

TELEPHONE DATE
 717 542-3220 94 8 22
 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 - SUSQUEHANA
ADDRESS TWO NORTH NINTH STREET
 ALLENTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
PA0047325 **074 A**
 PERMIT NUMBER DISCHARGE NUMBER

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

FACILITY
LOCATION
ATTN: R. L. DUFFY, SUPV OPER TECHNOL

MONITORING PERIOD							
FROM	YEAR	MO.	DAY	TO	YEAR	MO.	DAY
	94	07	01		94	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-55)	MAXIMUM (56-57)	UNITS (58-59)	MINIMUM (60-61)	AVERAGE (62-63)	MAXIMUM (64-65)	UNITS (66-67)			
PH		*****	*****		7.65 7.40 8/19/94	*****	7.65	(12)	0	1/31	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	5.0 MINIMUM	*****	9.0 MAXIMUM	SU			DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	1.6	1.6	(19)	0	1/31	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30.0 NO AVG	100.0 DAILY MX	HG/L			ONCE/ MONTH GRAB
OIL AND GREASE FROM EXTER. GRAV METER	SAMPLE MEASUREMENT	*****	*****		*****	3.3	3.3	(19)	0	1/31	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15.0 NO AVG	20.0 DAILY MX	HG/L			ONCE/ MONTH GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0087	0.0087	(03)	*****	*****	*****		X	1/31	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	NGD	*****	*****	*****	*****			DAILY ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 R.G. Byram, 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.)

Roy J. ...
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 717 542-3330
 DATE 94 8 22
 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 SUS JUKKWA
ADDRESS 10 South Ninth Street
 PLEHMON PA 18101

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

MAJOR Form Approved
 (SUBR 02) OMB No. 2040-0004
 F - FINAL
 SEWAGE TREATMENT EFFLUENT

PAG047325
 PERMIT NUMBER

079 A
 DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	07	01		94	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

FACILITY
 LOCATION
 VLN: R. L. DOTI, SUPV OPER PLCHNOL

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.40	*****	7.60	(12)	0	3/31	GRAB
COUCC A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU			DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.89	*****	(26)	*****	6.0	*****	(19)	*	1/31	GRAB
90530 A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	20.00 NO AVG	*****	LBS/DY	*****	30.00 NO AVG	*****	MG/L			ONCE/ MONTH COMP-8
FLOW, IN CONDUIT OR TANK TREATMENT PLANT	SAMPLE MEASUREMENT	0.020	0.027	(03)	*****	*****	*****		*	3/31	Flo Ind
50050 A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	0.08 NO AVG	REPORT DAILY MX	HGD	*****	*****	*****	*****			DAILY FLOIND
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****		0.20	0.31	0.40	(19)	*	3/31	GRAB
50064 A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	*****	*****	*****	REPORT MINIMUM	REPORT ARI MEAN	REPORT MAXIMUM	MG/L			DAILY GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	0.0	*****	(13)	*	1/31	GRAB
74055 A 1 0 DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	*****	*****	*****	*****	200 30DA GEO	*****	/ 100ML			ONCE/ MONTH GRAB
BOD, CARBONACEOUS 5 DAY, 20C	SAMPLE MEASUREMENT	0.55	*****	(26)	*****	3.7	*****	(19)	*	1/31	GRAB
80082 A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	16.70 NO AVG	*****	LBS/DY	*****	25.0 NO AVG	*****	MG/L			ONCE/ MONTH COMP-8
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 R.G. Byram, 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 \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)

James J. ...
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 717 542-3220
 AREA CODE NUMBER
 DATE
 94 8 22
 YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME PELUSYLVANIA P & L - SUSQUEHNA
 ADDRESS PO BOX 111111 STREET
ALLIANTON PA 18101

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

PA0047325
 PERMIT NUMBER

171 A
 DISCHARGE NUMBER

MAJOR (SUBR 02) Form Approved OMB No. 2040-0004
 F - FINAL
 RADWASTE TREATMENT EFFLUENT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
94	07	01		94	07	31
(20-21)		(22-23) (24-25)		(26-27)		(28-29) (30-31)

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

FACILITY _____
 LOCATION _____
 ATE: R. L. DOLL, SUPER OPER TECHNOL

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (34-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED		*****	*****		*****	0.000	0.000	(19)	0	1/31	GRAB
00530 1 0 0		*****	*****	***	*****	30.0	100.0			ONCE/	GRAB
EFFLUENT GROSS VALUE				****		NO AVG	DAILY MX	MG/L		MONTH	
FLOW, IN CONDUIT OR		0.010	0.036	(03)	*****	*****	*****		*	1/31	ESTIMA
THRU TREATMENT PLANT		REPORT	REPORT		*****	*****	*****	****		DAILY	ESTIMA
50050 1 0 0		NO AVG	DAILY MX	MGD				****			
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
R.G. Byram, 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: 94 8 22
 AREA CODE: 717 NUMBER: 542-3220 YEAR: 94 MO: 8 DAY: 22

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 ALBION STREET
 ALLAMONSBURG PA 18101

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

PA0047325
 PERMIT NUMBER

271 A
 DISCHARGE NUMBER

MAJOR (SUBR 02) Form Approved OMB No. 2040-0004
 F - FINAL
 WASTE FILTER BYPASS

MONITORING PERIOD

FROM	YEAR	MO.	DAY	TO	YEAR	MO.	DAY
	94	07	01		94	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

FACILITY
 LOCATION
 ATRH: R. L. DUFF, SUPER OPER TECHNOL

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS (54-61)	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
SOLIDS, TOTAL SUSPENDED		*****	*****		*****			(19)			
00530 1 0 0		*****	*****	****	*****	30.0	100.0			ONCE/ GRAB	
EFFLUENT GROSS VALU		*****	*****	****	*****	NO AVG	DAILY MX	MG/L		MONTH	
OIL AND GREASE FROM EXTK-GRAB MEAS		*****	*****		*****			(19)			
00556 1 0 0		*****	*****	****	*****	15.0	20.0			ONCE/ GRAB	
EFFLUENT GROSS VALU		*****	*****	****	*****	NO AVG	DAILY MX	MG/L		MONTH	
FLOW, IN CONDUIT OR INTRU TREATMENT PLANT				(03)	*****	*****	*****				
50050 1 0 0		REPORT	REPORT		*****	*****	*****	****		DAILY FLOWING	
EFFLUENT GROSS VALU		NO AVG	DAILY MX	NGD	*****	*****	*****	****			

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			
R.G. Byram, Sr. V.P. Nuclear Operations		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	717 542-3220	94	8	22
TYPED OR PRINTED		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 - SUSQUEHANA
 ADDRESS TWO WORLD CENTER STREET
 ALLEGANY PA 15101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
 PA0047325 371 A
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 02) Form Approved OMB No. 2040-0004
 F - FINAL
 NEUTRALIZATION BASIN DISCHARGE

FACILITY
 LOCATION
 AREA: R. L. DUFFY, SUPV OPER TECHNOL

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	07	01		94	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (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 00539 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	1.96	1.96	(19)	0	1/31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 NO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTRA GRAY DET. 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	1.3	1.3	(19)	0	1/31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 NO AVG	20.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR IN-TU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.012	0.015	(03)	*****	*****	*****		X	2/31	ESTIMA
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 R.G. Byram, 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
George J. King

TELEPHONE 717 542-3220
 DATE 94 8 25
 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 RESTRICTIONS.
 *EN. FLOW SHALL BE MEASURED DAILY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PENNSYLVANIA P & L - SUSQUEHANNA
ADDRESS TWO COAL HILTS STREET
 ALLIUMON PA 15101

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

(2-16) **PAC047325** (17-19) **471 A**
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 02) Form Approved OMB No. 2040-0004
 F - FINAL
 WASTE FILTER EFFLUENT

FACILITY _____
 LOCATION _____
 RETN: R. L. DOLY, SUPV OPER TECHNOL

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	07	01		94	07	31

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (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	SAMPLE MEASUREMENT	*****	*****		*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 NO AVG	100.0 DAILY MX	MG/L		ONCE/ GRAB MONTH	
OIL AND GREASE FROM EXPT. GRAV MTH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 NO AVG	20.0 DAILY MX	MG/L		ONCE/ GRAB MONTH	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50950 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	*****	*****	*****				
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY FLOW	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 R.G. Byram, 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 1542-3220
 DATE 94 8 22
 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 PP&SILVERDA P & L - SUSQUEHNA
 ADDRESS 180 NORTH WINTH STREET
ALLENDALE PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
 PA0047325 571 A
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR C2) Form Approved OMB No. 2040-0004
 F - FINAL
 571 CIRC WATER PUMPHOUSE SUMP

FACILITY _____
 LOCATION _____
 LIA: R. L. DOTI, SUPV OPER TECHNOL

MONITORING PERIOD
 FROM YEAR 94 MO 07 DAY 02 TO YEAR 94 MO 07 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (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 VALU.		*****	*****		*****	21.9	56.1	(19)	0	6/31 GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0			ONCE/ GRAB MONTH
OIL AND GREASE FROM EXTRA GRAY WTR 00556 1 0 0 EFFLUENT GROSS VALU.		*****	*****		*****	0.96 2.47	20.0 2.47	(19)	0	3/31 GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0			ONCE/ GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU.		0.0431	0.0431	(03)	*****	*****	*****		*	3/31 Flo Ind
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY FLOIND
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>R.G. Byram, Sr. V.P. Nuclear Operations</u> TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 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 717 542-3220	DATE		
			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>R. G. Byram</i>	AREA CODE	NUMBER

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