

PERMITTEE NAME/ADDRESS (Include Facility Name) Location (if different)
NAME: EL PWR & IT - ST. LUCIE
ADDRESS: ENVIRONMENTAL AFFAIRS
PO BOX 14000
JUNO BEACH FL 33408

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
EL 0002208 (PERMIT NUMBER)
0011 (DISCHARGE NUMBER)

F - FINAL
 COND & AUX COOLING WATER

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 90 03 01 TO 90 03 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUR JA)
 NOTE: Read Instructions before completing this form.

PARAMETER: (32-37)	SAMPLE MEASUREMENT	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 Q 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	101	0	Hourly	Recorder
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	113	INST. MX	DEG. F	HOURLY RECORD
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG. 00018 1 Q 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	27	0	Hourly	Recorder
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	30	INST. MX	DEG. F	HOURLY RECORD
BORON, TOTAL (AS B) 01022 2 Q 0	SAMPLE MEASUREMENT	No discharges from refueling water tanks or nonaerated water holding tanks			*****	*****	40	INST. MX	MG/L	INGE/BATCH GRAB
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	40	INST. MX	MG/L	INGE/BATCH GRAB
OXIDANTS, TOTAL RESIDUAL 34044 P Q 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	2.01	0	CONTIN	Recorder
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.03	INST. MX	MG/L	CONTINUOUS
OXIDANTS, TOTAL RESIDUAL 34044 Q Q 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	.02	0	CONTIN	Recorder
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.1	INST. MX	MG/L	CONTINUOUS
OXIDANTS, FREE AVAILABLE 34045 R Q 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.2	0.5	DAILY AV	WEEKLY GRAB
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.2	0.5	DAILY AV	WEEKLY GRAB
OXIDANTS, FREE AVAILABLE 34045 S Q 0	SAMPLE MEASUREMENT	9006050171 900520 PDR ADCK 05000335 S PDR			*****	*****	.05	.09	DAILY AV	WEEKLY GRAB
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.2	0.5	DAILY AV	WEEKLY GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
J. H. Goldberg Exec. Vice President
 TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
J. H. Goldberg

TELEPHONE NUMBER: 407 465-3550
 DATE: 90 04 10

COMMENT AND EXPLANATION OF ANY VIOLATION:

P=AUXILIARY, Q=CONDENSER DISCHARGE, R=UNIT 1, S=UNIT 2.
 H DISCHARGES FROM REFUELING WATER STORAGE TANK AND NONAERATED WATER HOLDING TANK.
 BORON MONITORING REQUIRED WHEN P, Q, R, S DISCHARGES FROM REFUELING WATER STORAGE TANK AND NONAERATED WATER HOLDING TANK.