



FPL

P.O. Box 14000, Juno Beach, FL 33408-0420

AUG 10 1990

L-90-292

U. S. Nuclear Regulatory Commission
Attn: Document Control Desk
Washington, DC 20555

Gentlemen:

Re: St. Lucie Unit 2
Docket 50-389
Environmental Protection Plan Report -
National Pollutant Discharge
Elimination System (NPDES) Reportable Event

In accordance with Section 3.2.1 of the St. Lucie Unit 1 Environmental Protection Plan, attached is a copy of the Discharge Monitoring Report (DMR) required by the St. Lucie Plant NPDES Permit with respect to a reportable event. Additionally, a description of the event is provided.

Should you have any questions, please contact us.

Very truly yours,

D. A. Sager

by

H. J. Bessy

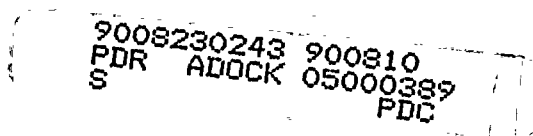
D. A. Sager
Vice President
St. Lucie Plant

DAS:JMP:kw

Attachments

cc: Stewart D. Ebnetter, Regional Administrator, Region II, USNRC
Senior Resident Inspector, USNRC, St. Lucie Plant

DAS/PSL #227



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SC-11
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On Saturday, June 16, 1990, the St. Lucie Unit 2 main condenser was chlorinated twice for a total of 220 minutes. The first chlorination was conducted from 8:00 A.M. to 9:50 A.M., and the second from 5:50 P.M. to 7:40 P.M. This represents an exceedence of the NPDES permit limit of 110 minutes per day per unit of chlorination time. Unit 1, which is also typically chlorinated for 110 minutes each day, was not chlorinated on June 16.

The week prior to the incident, chlorination of Unit 2 was being conducted on the day shift and Unit 1 on the evening shift. On June 13, 1990, the signs on the chlorination control panel (which indicate which unit is to be chlorinated and on which shift) were reversed so Unit 1 effluent could be sampled for NPDES permit compliance on the morning of June 15. Sometime, probably on June 16, 1990, the signs were again switched by operations personnel causing some confusion and resulting in Unit 2 being chlorinated on the day shift and again on the evening shift, even though the signs and logs indicated that Unit 1 should have been chlorinated on the evening shift.

The procedure for chlorination has now been modified to only allow Chemistry (Laboratory) personnel to alter or move the signs which indicate the order of chlorination. FPL expects that this countermeasure will prevent a recurrence of this event.

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

NAME VIETNAM VETERANS
 ADDRESS 931X 1400
PHOENIX AZ 85018
 FACILITY _____
 LOCATION _____
 ATT: L. J. PAI

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

(2-16) **FLO002208** (17-19) **001 1**
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 COND & AUX COOLING WATER

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 90 05 01 TO 90 06 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUJR JA)

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 (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
CHLORINE IN CONDUIT OR TREATMENT PLANT		*****	1477.70	MGD	*****	*****	*****	0	Hourly	Pump Log
PERMIT REQUIREMENT		*****	REPORT INST MX	MGD	*****	*****	*****		HOURLY	PMPLOG
CHLORINATION		*****	*****		*****	*****	110	0	Daily	Pump Log
PERMIT REQUIREMENT		*****	*****	***	*****	*****	120 MIN/ INST MX DAY		DAILY	PMPLOG
CHLORINATION		*****	*****		*****	*****	220	1*	Daily	Pump Log
PERMIT REQUIREMENT		*****	*****	***	*****	*****	120 MIN/ INST MX DAY		DAILY	PMPLOG
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										

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 H. J. Bossy
 TELEPHONE 407 465-3550
 DATE 90 07 09
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATION:

EXHIBITARY, CONDENSER DISCHARGE, R=UNIT 1, S=UNIT 2.
 1. TO CLARIFY THE BUILDING WATER STORAGE TANK AND NONAERATED WATER HOLDING TANK.

* See Attached letter

BORON MONITORING REQUIRED WHEN BATC

