

Peter M. Orphanos Site Vice President, Nine Mile Point Nuclear Station

P.O. Box 63 Lycoming, NY 13093

315 349 5200 Office www.exeloncorp.com

Peter.Orphanos@exeloncorp.com

NMPE1145

6NYCRR Part 750-1.16

March 8, 2019

New York State Department of Environmental Conservation Division of Environmental Permits 625 Broadway Albany, New York 12233-1750

Subject: Nine Mile Point Nuclear Station

State Pollutant Discharge Elimination System (SPDES) SPDES No.: NY0001015, DEC ID: 7355600013 Renewal Application

Attached please find the completed SPDES Permit Notice/Renewal Application and SPDES Permit Renewal Application Questionnaire for the Nine Mile Point Nuclear Station.

If you have any questions regarding this submittal, please contact Kent E. Stoffle, Sr. Environmental Chemist, at (315) 349-1364.

Sincerely,

Peter M. Orphanos Site Vice President, Nine Mile Point Nuclear Station

PMO/KES

Attachments: State Pollutant Discharge Elimination System (SPDES) Notice/Renewal Application and State Pollutant Discharge Elimination System (SPDES) Renewal Application Questionnaire

CODI _NRR

March 8, 2019 Page 2

cc: T.V. Murakami (NYSDEC Region 7)

NRC Regional Administrator, Region 1 NRC Resident Inspector NRC Document Control Desk

ATTACHMENT

State Pollutant Discharge Elimination System (SPDES) Notice/Renewal Application and State Pollutant Discharge Elimination System (SPDES) Renewal Application Questionnaire

waters a company to an

nsan dad - n g.

.

 $|||_{1} = |||_{1} = |||_{1}$

a ninda 1

 New York State Department of Environmental Conservation Division of Water 625 Broadway, Albany, 12233-3505 Phone: (518) 402-8111 Fax: (518) 402-9029 Website: www.dec.nv.gov



State Pollutant Discharge Elimination System (SPDES) NOTICE / RENEWAL APPLICATION

01/08/2019

Facility: NINE MILE PT NUCLEAR STATION LLC Ind. Code: 4911 County: OSWEGO DEC ID: 7355600013 SPDES No.: NY0001015 Permit Expiration Date: 11/30/2019 Renewal Application Due By: 06/03/2019

EXELON CORP ACCOUNTS PAYABLE PO BOX 17456 BALTIMORE MD 21297

Dear Permittee,

[r

The State Pollutant Elimination System (SPDES) permit for the facility referenced above expires on the date indicated. You are required by law to submit a renewal application at least 180 days prior to the expiration date of your current permit.

Please sign the Certification on this page and return it with the attached questionnaire. Refer to the attached instructions for who may sign this application. If there are any corrections to the above name or address, please write in those corrections above.

If there are changes to your discharge, or to operations affecting the discharge, then in addition to this renewal application you must also submit a separate permit modification application to the Regional Permit Administrator for the DEC region where the facility is located. See the attached instructions for information regarding filing an application for permit modification.

Please contact me if you have any questions.

Sincerely, Cheri Jamison.

Crew Sprin-

Permit Coordinator

SPDES PERMIT RENEWAL APPLICATION CERTIFICATION

CERTIFICATION: I hereby affirm that under penalty of perjury that the information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Peter M. Orphanos	Site Vice President	Nine Mile Point Nuclear Station, LLC
Name of Authorized Applicant	Title	Company
Signature of Authorized Applicant	Date	3/4/2019

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION State Pollutant Discharge Elimination System (SPDES) Permit RENEWAL APPLICATION QUESTIONNAIRE For Industrial & Municipal discharges only (Class 01, 03, 04, 05, 07 & 10)



4

• . .

Please enter the numbers from your	DEC ID Number:			ς∌ ⊷ • •,	•	
current permit:	SPDES Number:	NY -000 1015		•		
				•	5 . ¹ 2	
THIS PAGE MUS	T BE COMPLETI	ED AND RETURNED	WITH YOUR	RENEWA	L-APPLICA	ATION
Please TYPE or PRIF	NT neatly. Keep a c	copy for your records.	*			
Has the SPDES permi	t for your facility be	een modified in the past	5 years?	🗌 YES	X NO	i
Please indicate which	of the following be	st describes the situation	at your facility	y:	· · · · · · · · · · · · · · · · · · ·	
$\overline{\mathbf{X}}$ None of the co	nceme on the "Self	f Evaluation List? (and		-	• •	t
not be applyin	g for a modification	f Evaluation List" (see p n of the SPDES permit in	age 2) apply to n the foreseeab	my facility le future	at this time a	and I wil
· · · · ·	• • • •	*		· ·		(
	c mounied, i nave	If Evaluation List" have provided an explanation	helow (Note	that make on		· · · · · · ·
constitute an	application for pe	mut modification. An	application f	or permit i	explanation	does not
submitted sepa	rately to the Depart	tment's regional office)			•	
	ously submitted a r	permit modification and	ication to the I	Department's	regional off	ice.
	ously submitted a r	permit modification appl dification application to	ication to the I the Departmen	Department's	regional off	ice.
	ously submitted a p submit a permit mo	permit modification appl dification application to	the Departmen	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	يەر بىر كەر . بەر يەر يەر يەر يەر
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج
I previ I will i The items on t	ously submitted a p submit a permit mo he "Self Evaluation	permit modification appl dification application to h List" have left me juna	the Department	t's regional	office.	معہ 5 صالحا کر ج

Page 1 of 2

Setter Town

SELF EVALUATION LIST

The following information focuses on some of the more frequent reasons for requesting a SPDES permit modification. This is presented to aid you in deciding whether to file an application for a SPDES permit modification, but it does not replace the need for you to be thoroughly familiar with all regulatory requirements. As part of the renewal process, each permittee must determine whether a permit modification is required. Please refer to 6 NYCRR Part 750 for further details.

The Department must be notified of any of the following changes at your facility. Some of these changes may require a permit modification or approval:

- Facility expansions or other modifications, production increase or decrease of 20% or more, changed products, changed production methods, use of new water treatment chemicals, changed water intake quantities or locations, or significant increases in discharge flow rate through any outfall point.
- Changes in wastewater collection, treatment or disposal, including plans to substantially alter the method of sludge treatment, conditioning or disposal.
- Any monitoring on your facility's effluent(s) that indicates the presence of pollutants which are not authorized by your present SPDES permit or the presence of toxicity unless this information has been previously reported to the Department.

Any changes in the Permittee Name and Address, Facility Name and Address, or Discharge. Monitoring Report (DMR) Mailing Address found on the first page of your permit. Forms are available to transfer ownership, change permittee name, and authorize a person to sign and submit DMR Reports (see <u>http://www.dec.ny.gov/permits/6222.html</u>).

- Any changes or additions to storm water conveyances, including ditch or pipe outfalls, which are defined in federal regulations (40CFR Parts 122, 123 & 124) as discharges associated with "industrial activity" and thereby subject to federal storm water permit regulations.
- Knowledge of any outfalls, bypasses, overflows, or combined sewer overflow points in your system not presently authorized by your SPDES permit.

Any changes which could cause a violation of permit conditions.

• SPDES permit violations, petroleum or chemical spills and leaks, or wastewater treatment plant upsets which resulted in unauthorized pollutants being released to the surface or ground waters of the State which are reportable to the Department.

ADDITIONAL CONSIDERATIONS FOR PUBLICLY OWNED TREATMENT WORKS (POTW)

age 2 of

 Accepting or planning to accept industrial waste, hazardous waste, landfill leachate, septage, or other wastes containing pollutants not covered by your SPDES permit or constituting a substantial change in the volume or character of pollutants.

Any proposals for sewer extensions.



Department of Environmental Conservation

State Pollutant Discharge Elimination System (SPDES) Permit -**Designation of Authority**

Complete and submit this form with your SPDES application for any contact and authorization changes for the facility named below. Submit additional pages if needed.

Facility Name:	
Mailing Address, Post Office City, State, Zip Code:	
SPDES #: NY	

Water Permitting Facility Owner Contact The named individual and/or Title below is designated to receive and sign the SPDES application form, and receive a copy of the issued SPDES permit for this facility -

Name:	Robert E. Kreider Jr.
Title:	Plant Manager - Nine Mile Point
Company Name:	Nine Mile Point Nuclear Station, LLC
ivialling Address,	P.O. Box 63
Post Office City, State, Zip Code:	Lycoming, New York 13093
Eners H	·
Email:	Robert.Kreider@exeloncorp.com Telephone: (315) 349-5205

Water Fee Billing Contact The named individual and/or Title below is designated to receive mailings and handle all matters related to SPDES fee billing for this facility -

Name:	Kent E. Stoffle
	Sr. Environmental Chemist
Company Name:	Nine Mile Point Nuclear Station, LLC
	P.O. Box 63
State, Zip Code:	Lycoming, New York 13093
Email:	Kent.Stoffle@exeloncorp.com Telephone: (315) 349-1364
	(515) 549-1364

I am authorized* as the Permittee to make the changes noted above:

Name:	Peter M. Orphanos
Title:	Site Vice President
Company Name:	Nine Mile Point Nuclear Station, LLC
Mailing Address, Post Office City,	P.O. Box 63
State, Zip Code:	Lycoming, New York 13093
Email:	Peter.Orphanos@exeloncorp.com Telephone: (315) 349-5200
Signature of // Permittee:	Titum Ouph (313) 349-3201 Jutum Ouph (313) 349-32019

* A change in Permittee Name requires an Application for Permit Transfer. Acceptable Permittee signatures are as follows:

Organization

- Required Signature
- Corporation Principal executive officer of at least vice-president level.
- Partnership General partner Proprietor
- Sole proprietorship 0 Municipality, state, 0
- Principal executive officer, other ranking elected official. federal, or public facility

State Street in the

Nine Mile Point Nuclear Station, LLC Licensing Department, OPS Bldg. 1st Floor P.O. Box 63 Lycoming, NY 13093

U.S Nuclear Regulatory Commission Attn. Document Control Desk

Washington, DC 20555

hillstelanden