-15-4 (4/76)

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

SPDES – DISCHARGE MONITORING REPORT

SEE THE REVERSE SIDE OF PART 4 FOR INSTRUCTIONS

REGION	COUNTY	DATE PRODUCED	PAGE
9	04 CATTARAUGUS	01-31-79	1 of 3

FACILITY I.D.	REPORT PERIOD
NY 0000973	01-01-79 THRU 01-31-79

PARAMETER/UNITS	OUT FALL	MONITORING LOCATION	REPORT SECTION	MINIMUM	AVERAGE	MAXIMUM	# EX.	SAMPLE CHARACTERISTICS TYPE	FREQUENCY
FLOW RATE MGD	001	EFFLUENT VALUE 01000560501G1	LIMIT	MONITORING	REQUIRED-	NO LIMITS		XXXXXX	DAILY
			REPORTED VALUE	NO DISCHARGES DURING PERIOD				N/A	
XXXXXXXXXXX TOTAL VOLUME G XXXX	003	EFFLUENT VALUE 02000560503G1	LIMIT	MONITORING	REQUIRED-	NO LIMITS		XXXXXX	INSTANT
			REPORTED VALUE	NO TRANSFERS DURING PERIOD				N/A	
SUSPENDED SOLIDS MG/L	001	EFFLUENT VALUE 03001540101G1	LIMIT	MONITORING	REQUIRED-	NO LIMITS		24 HR COMP	MONTHLY
			REPORTED VALUE	NO DISCHARGES DURING PERIOD					
TEMPERATURE DEG F	001	EFFLUENT VALUE 04000100301G1	LIMIT	*********	*********	90.0000		GRAB	MONTHLY
			REPORTED VALUE	*********	*********	NO DISCHARGES			
TEMPERATURE DEG C	006	EFFLUENT VALUE 05000100406G1	LIMIT	*********	*********	32.000		GRAB	XXXXXXXX
			REPORTED VALUE	*********	*********	2.0	0		Bimonthly
PH SU	001	EFFLUENT VALUE 06004001201G1	LIMIT	6.000	*********	9.000		GRAB	DAILY
			REPORTED VALUE	NO DISCHARGES	*********	NO DISCHARGES			
PH SU	004	EFFLUENT VALUE 07004001204G1	LIMIT	6.000	*********	9.000		GRAB	WEEKLY
			REPORTED VALUE	6.9	*********	7.7	0		
PH SU	005	EFFLUENT VALUE 08004001205G1	LIMIT	6.000	*********	9.000		GRAB	MONTHLY
			REPORTED VALUE	6.2	*********	6.2	0		
PH SU	006	EFFLUENT VALUE 09004001206G1	LIMIT	6.000	*********	9.000		GRAB	XXXXXXXX
			REPORTED VALUE	6.4	*********	6.4	0		Bimonthly
AMMONIA, TOTAL (NH3) MG/L	006	EFFLUENT VALUE 10007100106G1	LIMIT	*********	*********	2.000		XXXXXXXXXXXX	XXXXXXXX
			REPORTED VALUE	*********	*********	0.13		Grab	Bimonthly

2900600 88

I hereby affirm under penalty of perjury that information provided on this form 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.

TYPEWRITTEN NAME AND TITLE

W. A. Oldham, General Manager

☒ 1 PERMITTEE
☐ 2 AGENT

SIGNATURE

DATE 2-12-79

NUCLEAR FUEL SERVICES
POST OFFICE BOX 124
WEST VALLEY NY 14171

TYPE PERMIT-02 DISCH CLASS-P FAC I.D.-NY 0000973

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NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

SPDES – DISCHARGE MONITORING REPORT

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FACILITY I.D.	REPORT PERIOD	
NY.0000973	01-01-79 THRU 01-31-79	1

PARAMETER/UNITS	OUT FALL	MONITORING LOCATION	REPORT SECTION	MINIMUM	AVERAGE	MAXIMUM	# EX.	SAMPLE CHARACTERISTICS TYPE	FREQUENCY
BARIUM MG/L	001	EFFLUENT VALUE 1101007010101	LIMIT	**********	**********	1.000		24 HR COMP	MONTHLY
			REPORTED VALUE	**********	**********	NO DISCHARGES			
LEAD MG/L	001	EFFLUENT VALUE 1281051010101	LIMIT	**********	**********	0.500		24 HR COMP	MONTHLY
			REPORTED VALUE	**********	**********	NO DISCHARGES			
MANGANESE-TOTAL MG/L	001	EFFLUENT VALUE 1301055010101	LIMIT	**********	**********	1.0000		24 HR COMP	MONTHLY
			REPORTED VALUE	**********	**********	NO DISCHARGES			
SUSPENDED SOLIDS MG/L	002	EFFLUENT VALUE 1451015401020 1	LIMIT	**********	50.000	100.000		24 HR COMP	MONTHLY
			REPORTED VALUE	**********	2.0	2.0	0		
SUSPENDED SOLIDS MG/L	004	EFFLUENT VALUE 1580154010401	LIMIT	**********	30.000	45.000		24 HR COMP	QUARTERLY
			REPORTED VALUE	**********	28.9	28.9	0		
SUSPENDED SOLIDS MG/L	005	EFFLUENT VALUE 1680154010501	LIMIT	**********	50.000	100.0000		24 HR COMP	MONTHLY
			REPORTED VALUE	**********	12.3	12.3	0		
BIO OXYGEN DEMAND- MG/L	004	EFFLUENT VALUE 1780010104 01	LIMIT	**********	**********	30.000		24 HR COMP	QUARTERLY
			REPORTED VALUE	**********	8.12	8.12	0		
ZINC MG/L	001	EFFLUENT VALUE 1885006010101	LIMIT	**********	**********	1.000		24 HR COMP	MONTHLY
			REPORTED VALUE	**********	**********	NO DISCHARGES			
CHROME-TOTAL MG/L	001	EFFLUENT VALUE 1934007010101	LIMIT	**********	**********	0.500		24 HR COMP	MONTHLY
			REPORTED VALUE	**********	**********	NO DISCHARGES			
COPPER MG/L	001	EFFLUENT VALUE 1942008010101	LIMIT	**********	**********	0.2000		24 HR COMP	MONTHLY
			REPORTED VALUE	**********	**********	NO DISCHARGES			

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TYPEWRITTEN NAME AND TITLE

W. A. Oldham, General Manager

☒ 1 PERMITTEE
☐ 2 AGENT

SIGNATURE

DATE 2-12-79

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SPDES – DISCHARGE MONITORING REPORT

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[illegible]ION	COUNTY	DATE PRODUCED	PAGE
9	04 CATTARAUGUS	01-05-79	3 of 3

[illegible]CILITY I.D.	REPORT PERIOD
NY0000973	01-01-79 THRU 01-31-79

PARAMETER/UNITS	OUT FALL	MONITORING LOCATION		MINIMUM	AVERAGE	MAXIMUM	# EX.	TYPE	FREQUENCY
				REPORT SECTION				SAMPLE CHARACTERISTICS	
NICKEL MG/L	001	EFFLUENT VALUE 2155010010131	LIMIT	*********	*********	[illegible]		24 HR COMP [illegible]	[illegible]
			REPORTED VALUE	********* *********	********* *********	NO DISCHARGES			
IRON-TOTAL MG/L	006	EFFLUENT VALUE 2265012010601	LIMIT	*********	*********	1.[illegible]		xxxxxxxxxxxxxx	xxxxxxxxx
			REPORTED VALUE	********* *********	********* *********	0.06	0	Grab	Bimonthly
SETTLEABLE SOLIDS ML/L	004	EFFLUENT VALUE 2329903140401	LIMIT	*********	0.100	0.3000		GRAB	WEEKLY
			REPORTED VALUE	********* *********	<0.1	<0.1	0		
AMMONIA-FREE MG/L	006	EFFLUENT VALUE 2499924010601	LIMIT	*********	*********	0.150[illegible]		xxxxxxxxxxxxx	xxxxxxxx
			REPORTED VALUE	********* *********	********* *********	<0.0001	0	N/A	N/A
			LIMIT						
			REPORTED VALUE						
			LIMIT						
			REPORTED VALUE						
			LIMIT						
			REPORTED VALUE						
			LIMIT						
			REPORTED VALUE						
			LIMIT						
			REPORTED VALUE						
			LIMIT						
			REPORTED VALUE						

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[illegible]YPEWRITTEN NAME AND TITLE: W. A. Oldham, General Manager

[X] 1 PERMITTEE
[ ] 2 AGENT

[illegible]IGNATURE: WAOldham

DATE: 2-12-79

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