Wisconsin Electric
POWER COMPANY

231 W Michigan, P.O. Box 2046, Milwaukee, WI 53201

(414) 221-2345

February 2, 1990

Administrator
U. S. Environmental Protection Agency
Region V
230 South Dearborn Street
Chicago, IL 60604

Gentlemen:

SUBJECT: SUBMISSION OF FORM 1 - STORM WATER PERMIT APPLICATION FOR POINT BEACH NUCLEAR PLANT

Pursuant to the storm water discharge permit application requirements of §402 (p)(4)(A) of the Clean Water Act, Form 1 and a site location map for the Point Beach Nuclear Plant are attached.

Because final NPDES permit application regulations for storm water discharges have not yet been promulgated, application requirements remain uncertain. In the absence of final regulations, this submission reflects Wisconsin Electric's effort to comply with the requirements of the Clean Water Act. After promulgation of final regulations, this application will be supplemented, if needed, with any additional required information.

Sincerely,

David M. Lee, P.E.
Water Quality Engineer
Environmental Department

cc: Wisconsin DNR - WPDES Permit Section
NRC Document Control Desk

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Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-R0175

FORM 1 GENERAL

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

# GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F WI-0000957-4 D

## LABEL ITEMS

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

WI-0000957-4
Point Beach Nuclear Plant
P. O. Box 2046
Milwaukee, WI 53201

6610 Nuclear Road
Two Rivers, WI 54241

ACE

## GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

## II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

| SPECIFIC QUESTIONS | MARK 'X' YES | MARK 'X' NO | MARK 'X' FORM ATTACHED |
|---|---|---|---|
| A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A) | | X | |
| B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B) | | X | |
| C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C) | X | | |
| D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D) | | X | |
| E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3) | | X | |
| F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4) | | X | |
| G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4) | | X | |
| H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4) | | X | |
| I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5) | | X | |
| J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5) | | X | |

## III. NAME OF FACILITY

1 SKIP: Point Beach Nuclear Plant

## IV. FACILITY CONTACT

| A. NAME & TITLE (last, first, & title) | B. PHONE (area code & no.) |
|---|---|
| 2 Lee David M Water Quality Engr | 414 221 2158 |

## V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: 3 P. O. Box 2046

| B. CITY OR TOWN | C. STATE | D. ZIP CODE |
|---|---|---|
| 4 Milwaukee | WI | 53201 |

## VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: 5 6610 Nuclear Road

B. COUNTY NAME: Manitowoc

| C. CITY OR TOWN | D. STATE | E. ZIP CODE | F. COUNTY CODE (if known) |
|---|---|---|---|
| 6 Two Rivers | WI | 54241 | 036 |



CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

## VII. SIC CODES (4-digit, in order of priority)

A. FIRST: 4911 (specify) Steam Electric Power

B. SECOND: (specify)

C. THIRD: (specify)

D. FOURTH: (specify)

## VIII. OPERATOR INFORMATION

A. NAME: Wisconsin Electric Power Company

B. Is the name listed in Item VIII-A also the owner? [XX] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box. If "Other", specify.)
F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)
P (specify)

D. PHONE (area code & no.): A 414 221 2158

E. STREET OR P.O. BOX: P. O. Box 2046

F. CITY OR TOWN: Milwaukee

G. STATE: WI

H. ZIP CODE: 53201

## IX. INDIAN LAND

Is the facility located on Indian lands? [ ] YES [XX] NO

## X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water): N WI-0000957-4

D. PSD (Air Emissions from Proposed Sources): P

B. UIC (Underground Injection of Fluids): U

E. OTHER (specify): (specify)

C. RCRA (Hazardous Wastes): R

G. OTHER (specify): (specify)

## XI. MAP

Attach to this application a topog[illegible] of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the loc[illegible] each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal fa[illegible] each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See in[illegible] for precise requirements.

## XII. NATURE OF BUSINESS (provide a brief description)

Point Beach is a steam electric power plant with two nuclear powered steam supply systems, which drive two turbine generators. These turbine generators are rated at 495 megawatts each.

Note: This Form 1 application is being submitted pursuant to the storm water discharge permit provisions of the Clean Water Act.

## XIII. CERTIFICATION (see instructions)

*I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the 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.*

| A. NAME & OFFICIAL TITLE (type or print) | B. SIGNATURE | C. DATE SIGNED |
|---|---|---|
| Carlyle W. Fay<br>Vice President | Mike for C.W. Fay | 2-2-90 |

COMMENTS FOR OFFICIAL USE ONLY

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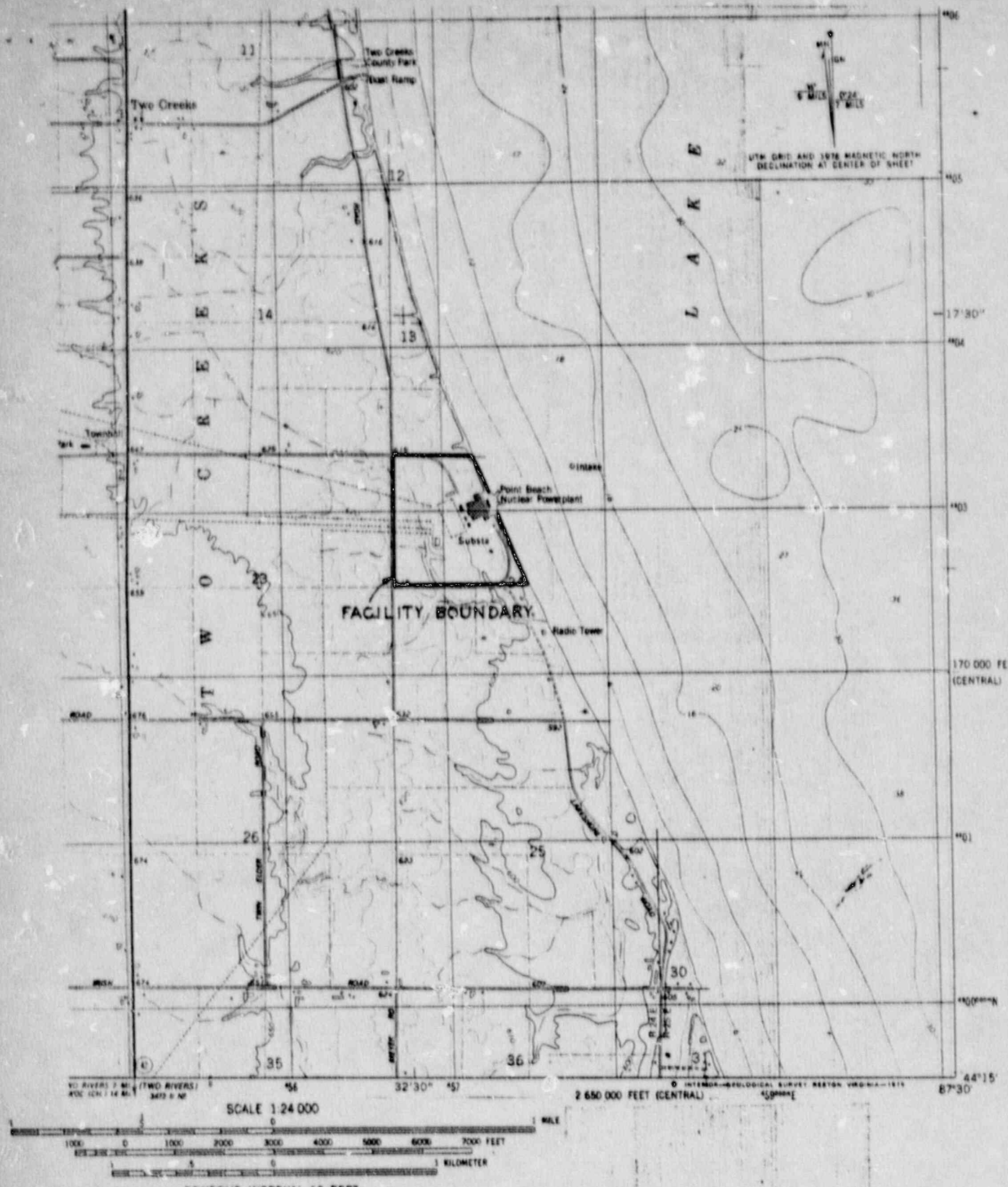
EPA Form 3510-1 (6-80) REVERSE




# LOCATION MAP
# POINT BEACH NUCLEAR PLANT
# TWO RIVERS, WISCONSIN

FIGURE 1