

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

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
PERMIT NUMBER

401 A
DISCHARGE NUMBER

I - INITIAL LIMITS
401 A COOLING TOWER PUMPHOUSE

IEDS
11

FACILITY _____
LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	08	01		84	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00530 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L	ONCE/ MONTH	GRAB
OIL AND GREASE FREDN EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00556 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT				*****	*****	*****	*****		
50050 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	ONCE/ MONTH	ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
General Manager
Fossil Generation Unit
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 23 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-4343
AREA CODE NUMBER
DATE
YEAR MO DAY

SAMPLES TAKEN AT LOC 01, COOL TOWER PUMPHOUSE LOW VOLUME, PRIOR TO COMB WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.
8410150514 840831
PDR ADOCK 05000334
R PDR

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

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

(2-15) PA0025615 PERMIT NUMBER
(17-19) 004 A DISCHARGE NUMBER

F - FINAL LIMITS
004 A COOLING TOWER OVERFLOW

FACILITY _____
LOCATION _____

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	08	01		84	08	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	SAMPLE MEASUREMENT	(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			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.83	*****	7.83	0	Once Month	Grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU	ONCE/MONTH	GRAB
FLOW, IN CONDUIT DR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	<0.001	<0.001		*****	*****	*****	*****	Once Month	Estima
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	ONCE/MONTH	ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
General Manager
Fossil Generation Unit

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
C. Feitknecht

TELEPHONE: 412 393-4343
DATE: 8/29/83

NEW MONITORING ONCE PER MONTH ONLY WHEN DISCHARGING.
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME **DUQUESNE LIGHT COMPANY**
ADDRESS **BEAVER VALLEY ATOMIC POWER ST.**
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
PERMIT NUMBER

303 A
DISCHARGE NUMBER

I - INITIAL LIMITS
303 A NONRAD SYSTEM LEAKAGE

FACILITY _____
LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	08	01		84	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.46	*****	7.46		0	Once/	Grab
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		ONCE/	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	87	87		0	Once/	Grab
00530 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	30DA AV	100 7DA AV	MG/L		ONCE/	GRAB
OIL AND GREASE FREON EXTR-GRAY METH	SAMPLE MEASUREMENT	*****	*****	*****	*****	9	9		0	Once/	Grab
00556 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	15 30DA AV	20 7DA AV	MG/L		ONCE/	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.015	0.034	*****	*****	*****	*****	*****		Once/	Estima
50050 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		ONCE/	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
General Manager
Fossil Generation Unit
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
C. Feitknecht

TELEPHONE
412 393-4343
DATE
84 09 28

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SAMPLES TAKEN AT NONRAD SYSTEM & FLOOR DRAIN SYSTEM PRIOR TO COMBINATION WITH EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
PERMIT NUMBER

302 A
DISCHARGE NUMBER

F - FINAL LIMITS
302 A SEWAGE TREATMENT SYSTEM

FACILITY _____
LOCATION _____

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	08	01		84	08	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	22	22		0	Once Month	
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 30DA AV	45 7DA AV	MG/L		TWICE/ MONTH	COMP-8
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.19		6.88		0	31/ Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM		9.0 MAXIMUM	SU		TWICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	21	24		0	31/ Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 30DA AV	45 7DA AV	MG/L		TWICE/ MONTH	COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	0.006	0.007	*****	*****	*****	*****	*****		Once/ Month	Estim.
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		TWICE/ MONTH	MEASRD
COLIFORM, FECAL GENERAL 74055 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	0	0	#/	0	5/ Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	200 30DA GEO	400 7DA GEO	100ML		TWICE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
General Manager
Fossil Generation Unit
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-4343
DATE
84 07 25

SAMPLES TAKEN AT LOC 0, SEWAGE TREATMENT SYSTEM PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

Form Approved OMB No. 2040-0004 Expires 2-29-84

NAME **DUQUESNE LIGHT COMPANY**
 ADDRESS **BEAVER VALLEY ATOMIC POWER ST.**
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
 PERMIT NUMBER

301 A
 DISCHARGE NUMBER

F - FINAL LIMITS
301 A CLARIFIER BLOWDOWN

FACILITY _____
 LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	08	01		84	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-61)	MAXIMUM (54-61)	UNITS (54-61)	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (46-53)	UNITS (46-53)			
PH	00400 0 0 SEE COMMENTS BELOW	*****	*****	*****	7.38	*****	7.68	SU	0	Twice Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM			TWICE MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	00530 0 0 SEE COMMENTS BELOW	0.24	0.30		*****	*****	*****	MG/L	0	Twice Month	Comp. 24 hrs
	PERMIT REQUIREMENT	2.8 DAILY AV	14.3 DAILY MX	LBS/DY	*****	*****	*****	DAILY AV DAILY MX		TWICE MONTH	COMP 24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	50050 0 0 SEE COMMENTS BELOW	0.003	0.012		*****	*****	*****	*****		31/ Month	Measrd
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		TWICE MONTH	MEASRD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
 General Manager
 Fossil Generation Unit
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
C. Feitknecht

TELEPHONE
 412 393-4343
 AREA CODE NUMBER
 DATE
 84 07 28
 YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SAMPLES TAKEN AT LOCATION 0, TREATED CLARIFIER BLOWDOWN & FILTER BKWSH, PRIOR TO EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

NAME **DUQUESNE LIGHT COMPANY**
 ADDRESS **BEAVER VALLEY ATOMIC POWER ST.**
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
 PERMIT NUMBER

003 A
 DISCHARGE NUMBER

F - FINAL LIMITS
003 A SANITARY WASTE

FACILITY _____
 LOCATION _____

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	08	01	TO	84	08	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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 (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	8.66	*****	*****	*****	0	Once/ MONTH	Grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.08	0.13		*****	*****	*****	*****		Once Month	Calctd
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		ONCE/ MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
 General Manager
 Fossil Generation Unit
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
C. Feitknecht

TELEPHONE NUMBER 412 393-4343
 DATE 84 09 25
 AREA CODE NUMBER YEAR MO DAY

SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
PERMIT NUMBER

201 A
DISCHARGE NUMBER

I - INITIAL LIMITS
201 A LOW VOLUME WASTE STREAM

FACILITY _____
LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	08	01		84	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge 201

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****	*****							
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM		9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****						
00530 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREDN EXTR-GRAY METH	SAMPLE MEASUREMENT	*****	*****	*****	*****						
00556 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT				*****	*****	*****	*****			
50050 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		ONCE/ MONTH	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

C. Feitknecht
General Manager
Fossil Generation Unit

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
C. Feitknecht

TELEPHONE
412 393-4343
DATE
89 07 28

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SAMPLES TAKEN AT LOC 0, LOW VOLUME WASTE STREAMS PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

NAME **DUQUESNE LIGHT COMPANY**
 ADDRESS **BEAVER VALLEY ATOMIC POWER ST.**
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
 PERMIT NUMBER

002 A
 DISCHARGE NUMBER

F - FINAL LIMITS
 002 A SCREEN BACKWASH, ETC

FACILITY _____
 LOCATION _____
 ATTN: **C. FEITKNECHT, GEN. SUPT**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	08	01		84	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.53	*****	*****	0	Once/ Month	Grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.09	0.09		*****	*****	*****	*****	Once/ Month	Calctd
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	ONCE/ MONTH	CALCTD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER C. Feitknecht General Manager Fossil Generation Unit TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
			412 393-4343	YEAR	MO	DAY

SEE PERMIT AND/OR SPECIAL CONDITIONS (Attachments here)

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

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

Form Approved OMB No. 2040-0004 Expires 2-29-84

NAME **DUQUESNE LIGHT COMPANY**
 ADDRESS **BEAVER VALLEY ATOMIC POWER ST.**
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
 PERMIT NUMBER

103 A
 DISCHARGE NUMBER

I - INITIAL LIMITS
103 A SOFTENER REGENERATES

FACILITY _____
 LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	08	01		84	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM						
SOLIDS, TOTAL SUSPENDED 00530 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****						0	Once/ Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	*****			<0.1	<0.1				
OIL AND GREASE FREON EXTR-GRAY METH 00556 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****						0	Once/ Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	*****			8	8				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	0.020	0.020		*****							Twice/ Month	Estima
	PERMIT REQUIREMENT	*****	*****	MGD	*****							Twice/ Month	ESTIMA
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
 General Manager
 Fossil Generation Unit
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
C. Feitknecht

TELEPHONE
 412 393-4343
 DATE
 84 07 25

SAMPLES TAKEN AT LOC 0, SOFTENER REGENERATORS PRIOR TO COMBINATION WITH OTHER EFFLUENT.
 SEE P 23 AND 24, SPECIAL CONDITIONS.

NAME **DUQUESNE LIGHT COMPANY**
 ADDRESS **BEAVER VALLEY ATOMIC POWER ST.**
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
 PERMIT NUMBER

102 A
 DISCHARGE NUMBER

I - INITIAL LIMITS
102 A AUX BOILER BLOWDOWN

FACILITY _____
 LOCATION _____

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	08	01	TO	84	08	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge 102

ATTN: **C. FEITKNECHT, GEN. SUPT**

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
COPPER, TOTAL (AS CU) 01042 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****						
	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	***** DAILY MX	1 MG/L		TWICE/MONTH	GRAB
IRON, TOTAL (AS FE) 01045 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****						
	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	***** DAILY MX	1 MG/L		TWICE/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
 General Manager
 Fossil Generation Unit
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE NUMBER: **412 393-4343**
 DATE: **84 07 25**

CONDITIONS AND VIOLATIONS OR PENALTIES (Reference all violations here)
SAMPLES TAKEN AT LOC 0, BOILER BLOWDOWN PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

PERMITTEE NAME/ADDRESS (The name of the Facility Name/Location if different)

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME **DUQUESNE LIGHT COMPANY**
ADDRESS **BEAVER VALLEY ATOMIC POWER ST.**
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
PERMIT NUMBER

101 A
DISCHARGE NUMBER

F - FINAL LIMITS
101 A CHEMICAL WASTE SUMP

FACILITY _____
LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	08	01		84	08	31

NOTE: Read instructions before completing this form.

ATTN: **C. FEITKNECHT, GEN. SUPT**

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(c Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH 00400 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	7.30	*****	8.12		0	Four/ Month Grab
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/GRAB MONTH
SOLIDS, TOTAL SUSPENDED 00530 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	5.12	8.54		*****				0	Twice/ Month Grab
	PERMIT REQUIREMENT	3.8 DAILY AV	45 DAILY MX	LBS/DY	*****	*****	*****	MG/L		TWICE/COMP MONTH 24
OIL AND GREASE FREON EXTR-GRAV METH 00556 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	1.46	2.76		*****				0	Twice/ Month Grab
	PERMIT REQUIREMENT	1.9 DAILY AV	9.0 DAILY MX	LBS/DY	*****	*****	*****	MG/L		TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	0.022	0.075		*****	*****	*****	*****		4/ Month Calctd.
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		TWICE/CALCTD MONTH
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
General Manager
Fossil Generation Unit
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
C. Feitknecht

TELEPHONE
412 393-4343
AREA CODE NUMBER
DATE
87 09 25
YEAR MO DAY

SAMPLES TAKEN AT LOCATION 0; CHEM WASTE SUMP PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

NAME **DUQUESNE LIGHT COMPANY**
 ADDRESS **BEAVER VALLEY ATOMIC POWER ST.**
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

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

PA0025615
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

F - FINAL LIMITS
001 A COOLING TOWER BLOWDOWN

Form Approved
 OMB No. 2040-0004
 Expires 2-29-84

FACILITY _____
 LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	08	01		84	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	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 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	94		Contin	Recorded
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			CONTIN	RECORD
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.67	*****	*****	8.19	0	4/31	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	*****	9.0		CONTIN	RECORD
OIL AND GREASE FREDN EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	9	0	Once/Mth	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	10		ONCE/	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	22.08	36.97	MGD	*****	*****	*****	*****		Contin-	Recorded
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		CONTIN	RECORD
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.02	0.2	0	Cont.	Record
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		CONTIN	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht
 General Manager
 Fossil Generation Unit

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED 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 SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 412 393-4343
 DATE
 84 07 29

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SEE PAGE 2 OF PERMIT FOR INFORMATION REGARDING TEMPERATURE. LOCATION 0 IS THE COOLING TOWER BASIN.



One Oxford Centre
301 Grant Street
Pittsburgh, PA 15279

(412) 393-6000

DUQUESNE LIGHT COMPANY
Fossil Generation Unit
2841 New Beaver Avenue, Bldg. #3
Pittsburgh, PA 15233

September 28, 1984

Director of Nuclear Reactor Regulations
Attention: Mr. Robert W. Reid, Chief
Operating Reactor Branch, No. 4
U. S. Nuclear Regulatory Commission
Washington, D. C. 20555

NPDES Monthly Report

Subject: BVPS No. 1
Docket No. 50-334
License DPR-66

Dear Mr. Reid:

Enclosed is a copy of the subject report as submitted to the Pennsylvania Department of Environmental Resources.

Very truly yours,

C. Feitknecht
General Manager
Fossil Generation

CF:ag

Enclosure

IE25
11



Duquesne Light

One Oxford Centre
301 Grant Street
Pittsburgh, PA 15279

(412) 393-6000

DUQUESNE LIGHT COMPANY
Fossil Generation Unit
2841 New Beaver Avenue, Bldg. #3
Pittsburgh, PA 15233

September 28, 1984

U. S. Environmental Protection Agency
Region III, Pennsylvania Section (3WM52)
Water Permits Branch
Water Management Division
Sixth and Walnut Streets
Philadelphia, PA 19106

NPDES Monthly Report

Gentlemen:

This letter forwards copies of our NPDES Monthly Reports as submitted to the Pennsylvania Department of Environmental Resources, Bureau of Water Quality Management.

Very truly yours,

C. Feitknecht
General Manager
Fossil Generation

CL:ag

Enclosure



Duquesne Light

One Oxford Centre
301 Grant Street
Pittsburgh, PA 15279

(412) 393-6000

DUQUESNE LIGHT COMPANY
Fossil Generation Unit
2841 New Beaver Avenue, Bldg. #3
Pittsburgh, PA 15233

September 28, 1984

Department of Environmental Resources
Bureau of Water Quality Management
600 Highland Building
121 S. Highland Avenue
Pittsburgh, PA 15206-3988

NPDES Monthly Report

Gentlemen:

The subject reports for Duquesne Light Company for August, 1984 are submitted for your consideration. A list of the permit numbers follows:

PA 0001571	Elrama Power Station
PA 0001589	Shippingsport Atomic Power Station
PA 0001619	Phillips Power Station
PA 0001627	Cheswick Power Station
PA 0025615	Beaver Valley Atomic Power Station
PA 0031933	Brunot Island Power Station

Very truly yours,

C. Feitknecht
General Manager
Fossil Generation

CF:ag

Enclosure